



Release Notes – v9.0.19

Some exciting features in this release!

✓ EMR Features

- Redesigned [Diagnosis & Problem List](#)
- Launched [Bed Management Module](#)
- New Charting Module [Flowsheet](#) to track Exercise details
- [Speech Therapy](#): ability to chart speech symbols

✓ PM Features

- Completely Re-Designed [Batch Payment](#)
- Allow undoing [ERA mapping](#)

Proprietary Notice Information: This document provides information about the new features with the upcoming upgrade release. The content in this document is provided for informational purposes only, and the information herein is subject to change without notice. This document also does not guarantee the delivery of these new features in anyway whatsoever. While every effort has been made to ensure that the information contained within this document and the features and changes described are accurate, IHCS cannot and does not accept any liability for errors, or omissions arising from the use of this information.

Any questions regarding the release notes should be addressed to support@insynchcs.com or call 877-346-7962 for customer service.

Contents

EMR Features.....	4
<i>Redesigned Diagnosis and Problem List Pages</i>	<i>4</i>
<i>Bed Management Module</i>	<i>11</i>
<i>Bed Tracking Report</i>	<i>18</i>
<i>New Flowsheet Module</i>	<i>19</i>
<i>Speech Therapy: Ability to Document Speech Symbols</i>	<i>21</i>
<i>Configure Scheduler Based on Role</i>	<i>21</i>
<i>Patient Search: Ability to Configure Certain Fields</i>	<i>22</i>
<i>Vitals: Ability to add Notes via Facesheet</i>	<i>23</i>
<i>Ability to Collect Copays and Generate Superbills for All Appointment Statuses</i>	<i>24</i>
<i>Appointment Reminders: Ability to use Provider's Other Name Field</i>	<i>24</i>
<i>Scheduler: Addition of AM/PM to Each Time Slot</i>	<i>24</i>
<i>Group Appointments: Enhanced Booking Option</i>	<i>25</i>
<i>Closed Encounter Date/Time on Treatment Plan Letter</i>	<i>26</i>
<i>Encounter Note Preview: Ability to Display Treatment Plan with Categories Visible</i>	<i>27</i>
<i>Patient Medication Report: New MRN Field</i>	<i>29</i>
<i>Care Plan: Ability to Change Provider Name for Each Problem</i>	<i>30</i>
<i>Portal Access for Inactive Patients</i>	<i>30</i>
<i>Patient Instructions in Portal when Sending Appointment Requests</i>	<i>31</i>
<i>Copy Accident Information from Previous Encounter</i>	<i>32</i>
<i>Ability to Configure which Encounter Note Elements are Visible on the Portal</i>	<i>33</i>
<i>Vitals: BMI Growth Chart</i>	<i>34</i>
<i>New ICD/Diagnosis Search Engine</i>	<i>35</i>
<i>Clinical Quality Measures (CQMs)</i>	<i>35</i>
PM Features	36
<i>Completely Re-Designed Batch Payment</i>	<i>36</i>
<i>View Payer Details when Printing Claims from New Charge</i>	<i>44</i>
<i>Allow Undoing ERA Mapping</i>	<i>44</i>
<i>Send Patient Statement for Minimum Balance only</i>	<i>45</i>
<i>Send Patient Statement after Specific Period only</i>	<i>46</i>
<i>Patient Statements – Access 'Not Processed' Statements By Default</i>	<i>47</i>
<i>Transmitted Discharge Details in 837 File for UB04 (Institutional Claims)</i>	<i>47</i>

<i>Transmitting Dunning Message</i>	<i>47</i>
<i>Next Appointment Date on the Unapplied Credit Report.....</i>	<i>48</i>
<i>Configure 'Online Payment Log' as Bookmark in Your Left Pane</i>	<i>48</i>
<i>Show Facility on the Daily Payments Report</i>	<i>49</i>
<i>Generate Charge from Scheduler</i>	<i>49</i>
<i>Transmitting Family Statements to Practice Insight (PI)</i>	<i>50</i>
<i>View Encounter Note as a Separate Window.....</i>	<i>51</i>
<i>Added Claim Adjustment Reason Codes.....</i>	<i>52</i>
<i>Added Remittance Advice Remarks Codes</i>	<i>52</i>

EMR FEATURES

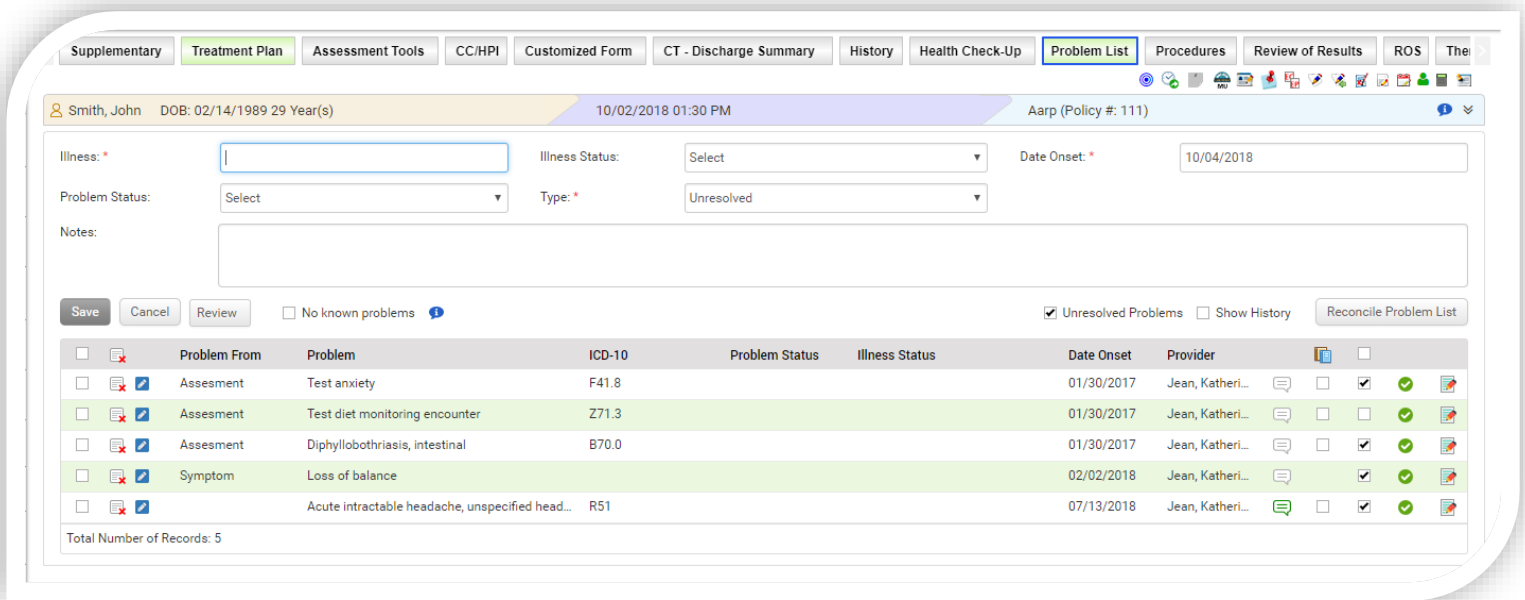
[Back](#)

This section includes the EMR features released in this version.

REDESIGNED DIAGNOSIS AND PROBLEM LIST PAGES

[Back](#)

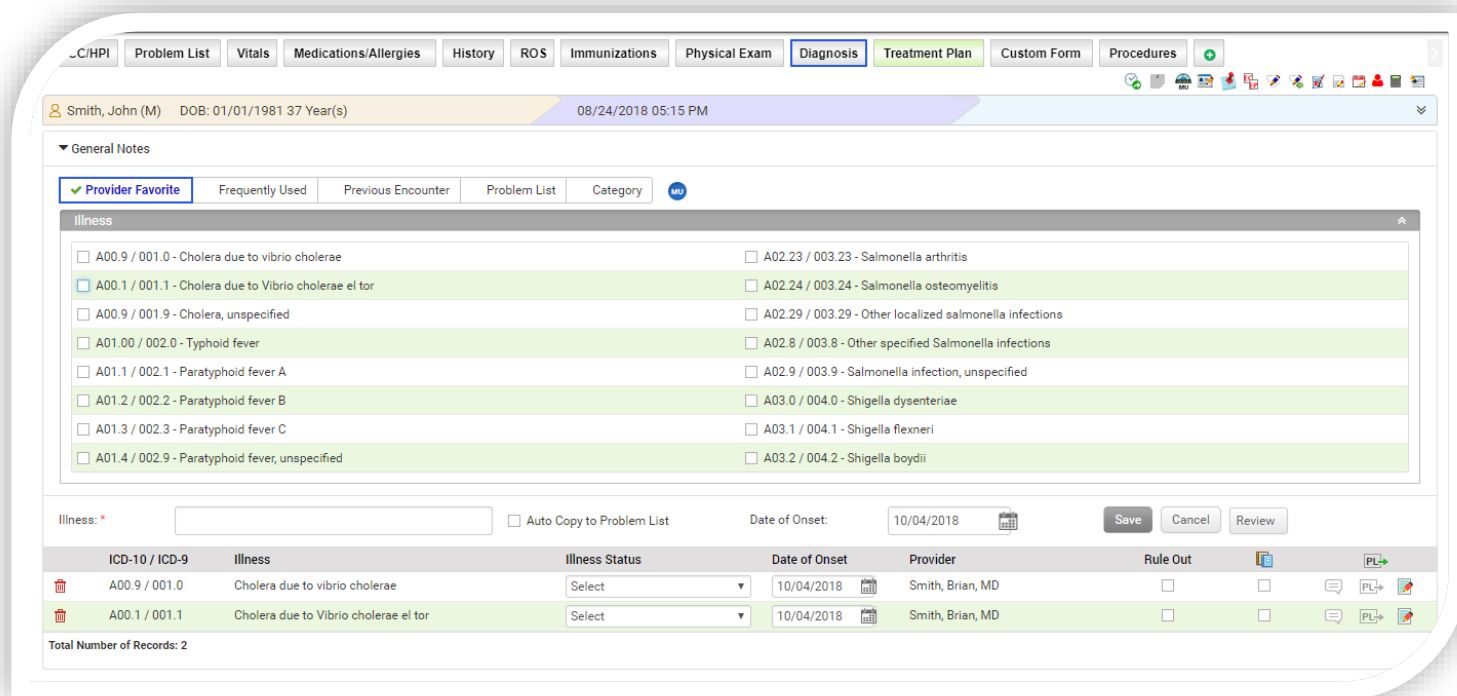
The Problem List is now fully redesigned. Below is a snapshot of the new user interface for the Problem List.



Problem From	Problem	ICD-10	Problem Status	Illness Status	Date Onset	Provider
Assesment	Test anxiety	F41.8			01/30/2017	Jean, Katheri...
Assesment	Test diet monitoring encounter	Z71.3			01/30/2017	Jean, Katheri...
Assesment	Diphylobothriasis, intestinal	B70.0			01/30/2017	Jean, Katheri...
Symptom	Loss of balance				02/02/2018	Jean, Katheri...
	Acute intractable headache, unspecified head...	R51			07/13/2018	Jean, Katheri...

The Diagnosis page is now fully redesigned. Below is a snapshot of the new user interface for the Diagnosis page.

Instead of panels, you can find the tabs to access Dx codes from different sections.



Smith, John (M) DOB: 01/01/1981 37 Year(s) 08/24/2018 05:15 PM

General Notes

Provider Favorite Frequently Used Previous Encounter Problem List Category

Illness

☐ A00.9 / 001.0 - Cholera due to vibrio cholerae ☐ A02.23 / 003.23 - Salmonella arthritis

☒ A00.1 / 001.1 - Cholera due to Vibrio cholerae el tor ☐ A02.24 / 003.24 - Salmonella osteomyelitis

☐ A00.9 / 001.9 - Cholera, unspecified ☐ A02.29 / 003.29 - Other localized salmonella infections

☐ A01.00 / 002.0 - Typhoid fever ☐ A02.8 / 003.8 - Other specified Salmonella infections

☐ A01.1 / 002.1 - Paratyphoid fever A ☐ A02.9 / 003.9 - Salmonella infection, unspecified

☐ A01.2 / 002.2 - Paratyphoid fever B ☐ A03.0 / 004.0 - Shigella dysenteriae

☐ A01.3 / 002.3 - Paratyphoid fever C ☐ A03.1 / 004.1 - Shigella flexneri

☐ A01.4 / 002.9 - Paratyphoid fever, unspecified ☐ A03.2 / 004.2 - Shigella boydii

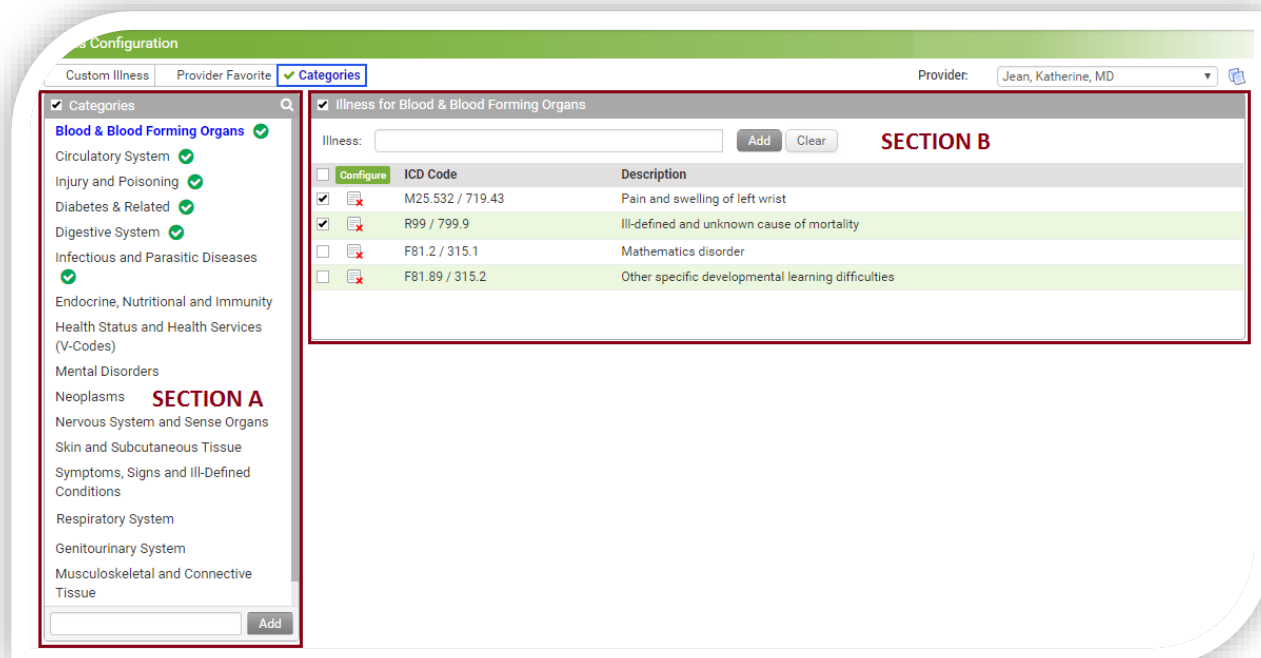
Illness: * ☐ Auto Copy to Problem List Date of Onset: 10/04/2018

ICD-10 / ICD-9	Illness	Illness Status	Date of Onset	Provider	Rule Out		PL+
A00.9 / 001.0	Cholera due to vibrio cholerae	Select	10/04/2018	Smith, Brian, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="button" value="PL+"/>
A00.1 / 001.1	Cholera due to Vibrio cholerae el tor	Select	10/04/2018	Smith, Brian, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="button" value="PL+"/>

Total Number of Records: 2

ILLNESS CONFIGURATION (CATEGORIES)

The Categories tab is mainly divided into 2 sections. Refer to the following screenshot:



Illness Configuration

Custom Illness Provider Favorite Categories Provider: Jean, Katherine, MD

Categories

Blood & Blood Forming Organs

Circulatory System

Injury and Poisoning

Diabetes & Related

Digestive System

Infectious and Parasitic Diseases

Endocrine, Nutritional and Immunity

Health Status and Health Services (V-Codes)

Mental Disorders

Neoplasms

Nervous System and Sense Organs

Skin and Subcutaneous Tissue

Symptoms, Signs and Ill-Defined Conditions

Respiratory System

Genitourinary System

Musculoskeletal and Connective Tissue

SECTION A

Illness for Blood & Blood Forming Organs

Illness:

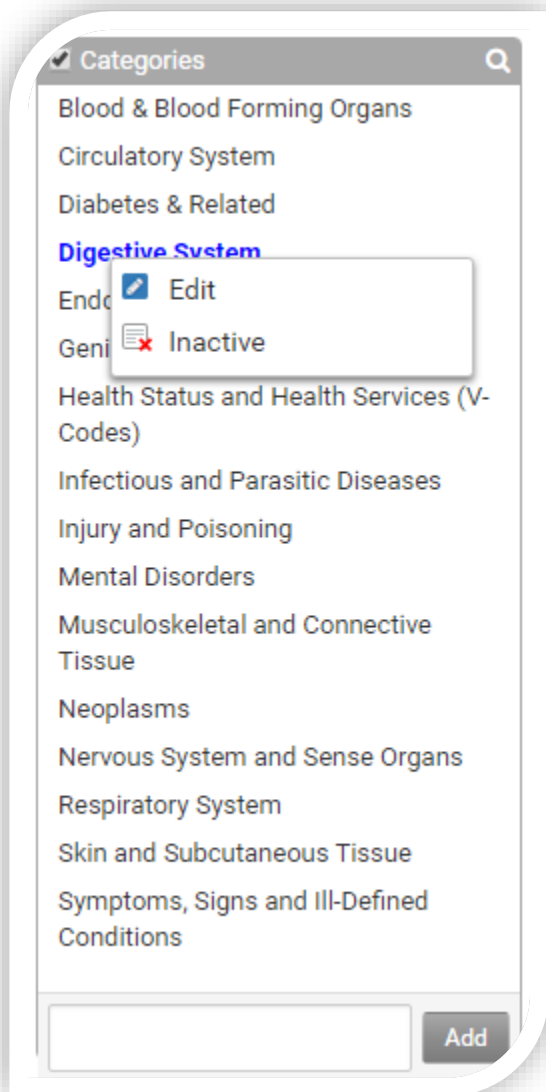
SECTION B

Configure	ICD Code	Description
<input checked="" type="checkbox"/>	M25.532 / 719.43	Pain and swelling of left wrist
<input checked="" type="checkbox"/>	R99 / 799.9	Ill-defined and unknown cause of mortality
<input type="checkbox"/>	F81.2 / 315.1	Mathematics disorder
<input type="checkbox"/>	F81.89 / 315.2	Other specific developmental learning difficulties

Section A: Category configuration

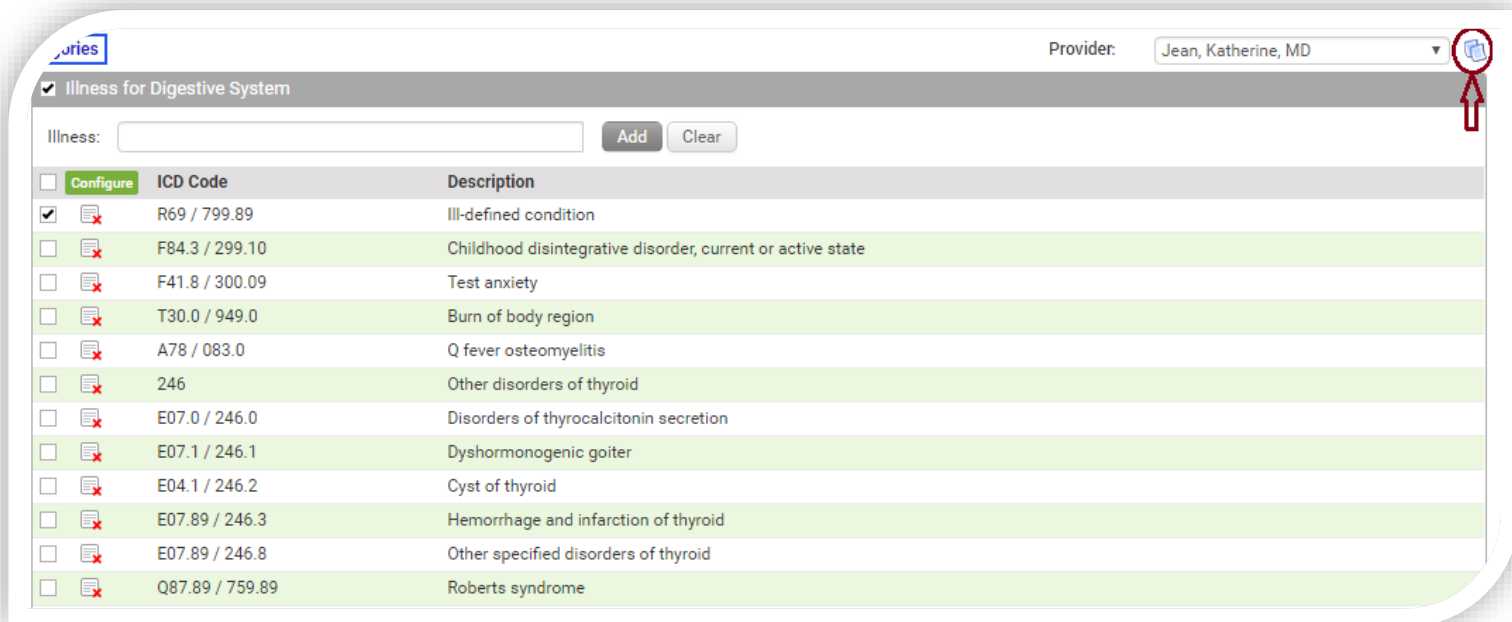
Section B: Illness configuration

Section A: Category configuration



- To add a new category, type in the box at the bottom and click Add.
- To update or inactivate any category, right-click the category.
- To search for any category from the long list, click the magnifier icon from the top right corner.













Section B: Illness configuration





Provider: Jean, Katherine, MD


Illness for Digestive System

Illness: Add Clear

<input type="checkbox"/>	Configure	ICD Code	Description
<input checked="" type="checkbox"/>		R69 / 799.89	Ill-defined condition
<input type="checkbox"/>		F84.3 / 299.10	Childhood disintegrative disorder, current or active state
<input type="checkbox"/>		F41.8 / 300.09	Test anxiety
<input type="checkbox"/>		T30.0 / 949.0	Burn of body region
<input type="checkbox"/>		A78 / 083.0	Q fever osteomyelitis
<input type="checkbox"/>		246	Other disorders of thyroid
<input type="checkbox"/>		E07.0 / 246.0	Disorders of thyrocalcitonin secretion
<input type="checkbox"/>		E07.1 / 246.1	Dyshormonogenic goiter
<input type="checkbox"/>		E04.1 / 246.2	Cyst of thyroid
<input type="checkbox"/>		E07.89 / 246.3	Hemorrhage and infarction of thyroid
<input type="checkbox"/>		E07.89 / 246.8	Other specified disorders of thyroid
<input type="checkbox"/>		Q87.89 / 759.89	Roberts syndrome

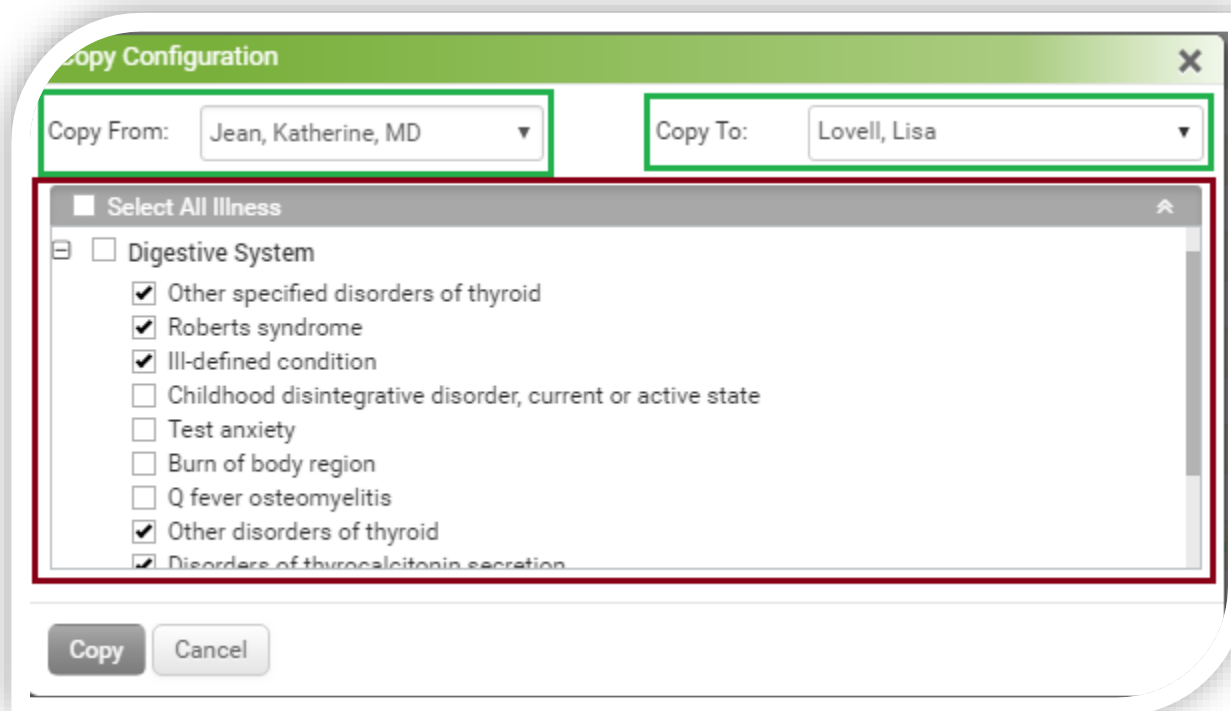
- To add a new illness, type in the box, select the required illness from the list and click Add.
- To inactivate the illness, click the Inactivate icon .
- To configure the illness for the selected Provider, select the illnesses from the list and click the Configure button in green .

Copy Configuration from Another Provider

If you already have configured illnesses for one provider and you want to use the same configuration for another provider, you can do that with the help of this feature. Click the Copy icon  as shown in above screen.

Select provider from which you want to copy the configuration in the “Copy From” field. Select provider for which the configuration is to be copied in the “Copy To” field.

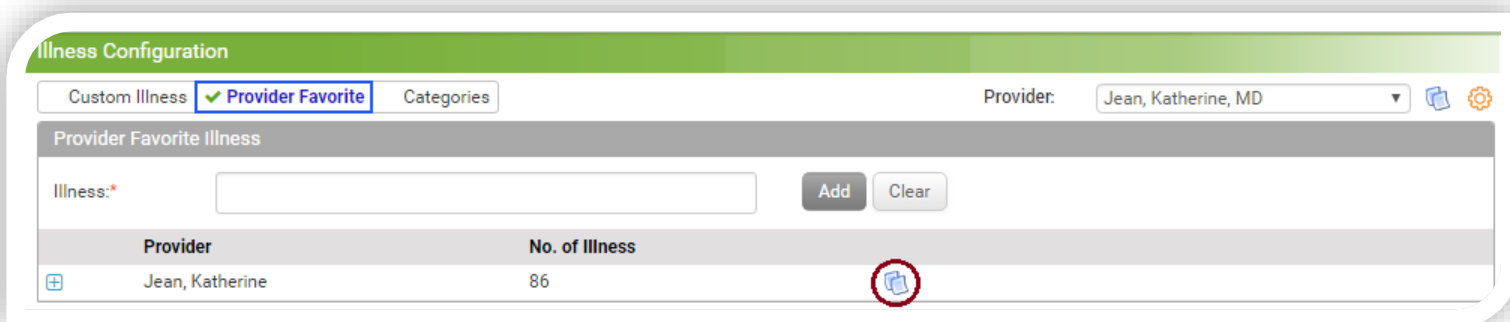
Select All Illness: Allows you to select specific illnesses from the list you want to copy.




ILLNESS CONFIGURATION (PROVIDER FAVORITE)

You can now configure Provider specific Favorite Illness list from the Provider Favorite tab.

Select the provider for whom you want to configure favorite list from the Provider drop-down. Now, type the illness name in the Illness field and click Add to add that illness into the selected provider's favorite list.



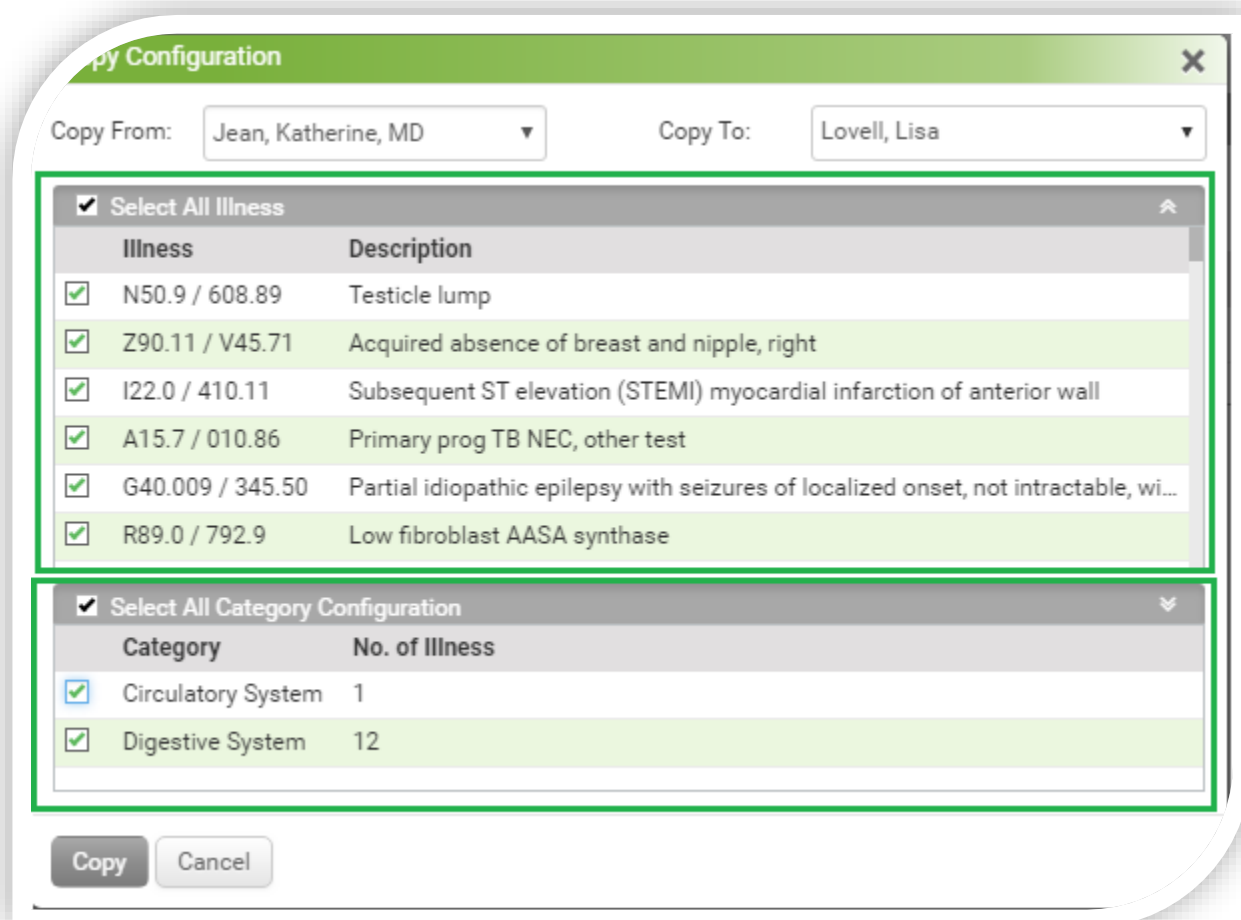
Copy Configuration from Another Provider

If you already have configured illnesses for one provider and you want to use the same configuration for another provider, you can do that with the help of this feature. Click the Copy icon  as shown in the screen below.

Select provider from which you want to copy the configuration in the “Copy From” field. Select provider for which the configuration is to be copied in the “Copy To” field.

Select All Illness: Allows you to select specific illnesses from the list you want to copy.

Select All Category Configuration: Allows you to select specific categories from the list you want to copy.



Copy Configuration

Copy From: Jean, Katherine, MD Copy To: Lovell, Lisa

Select All Illness	
Illness	Description
<input checked="" type="checkbox"/> N50.9 / 608.89	Testicle lump
<input checked="" type="checkbox"/> Z90.11 / V45.71	Acquired absence of breast and nipple, right
<input checked="" type="checkbox"/> I22.0 / 410.11	Subsequent ST elevation (STEMI) myocardial infarction of anterior wall
<input checked="" type="checkbox"/> A15.7 / 010.86	Primary prog TB NEC, other test
<input checked="" type="checkbox"/> G40.009 / 345.50	Partial idiopathic epilepsy with seizures of localized onset, not intractable, wi...
<input checked="" type="checkbox"/> R89.0 / 792.9	Low fibroblast AASA synthase

Select All Category Configuration	
Category	No. of Illness
<input checked="" type="checkbox"/> Circulatory System	1
<input checked="" type="checkbox"/> Digestive System	12

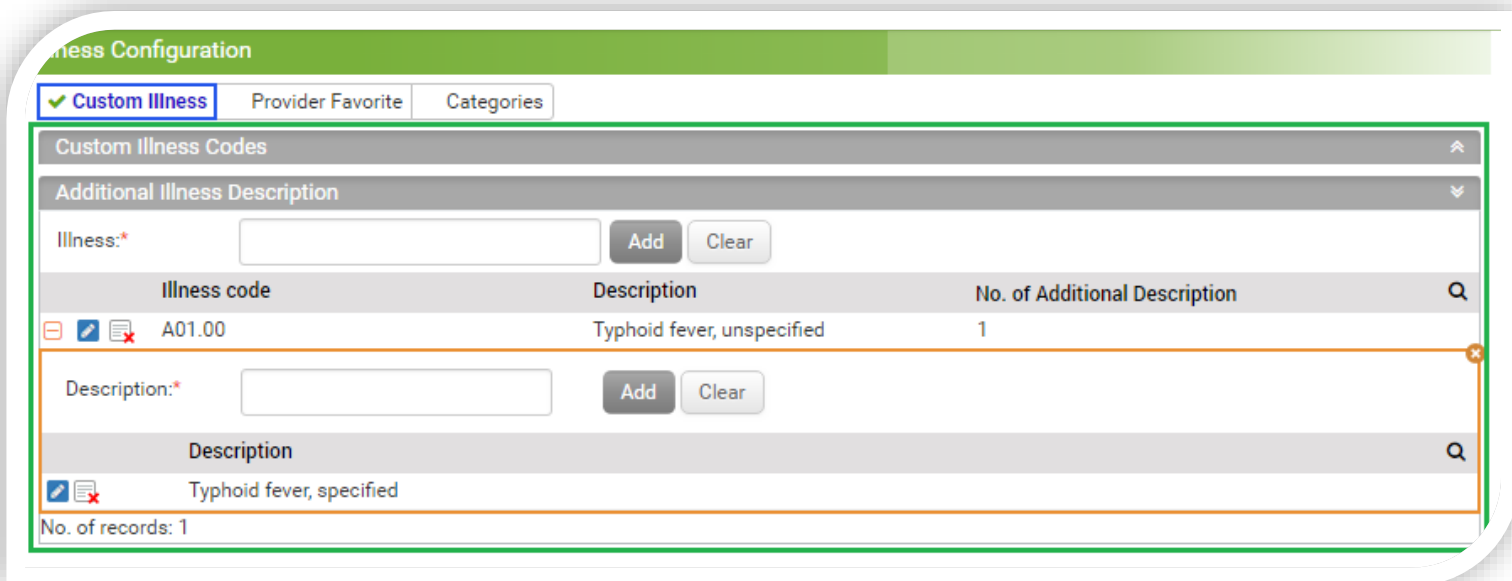
Copy Cancel

ILLNESS CONFIGURATION (CUSTOM ILLNESS)

You can now configure custom illnesses according to your requirement from the Custom Illness tab.

Additional Illness Description

This section facilitates you to add additional descriptions for the same illness code. Refer to the following screenshot:



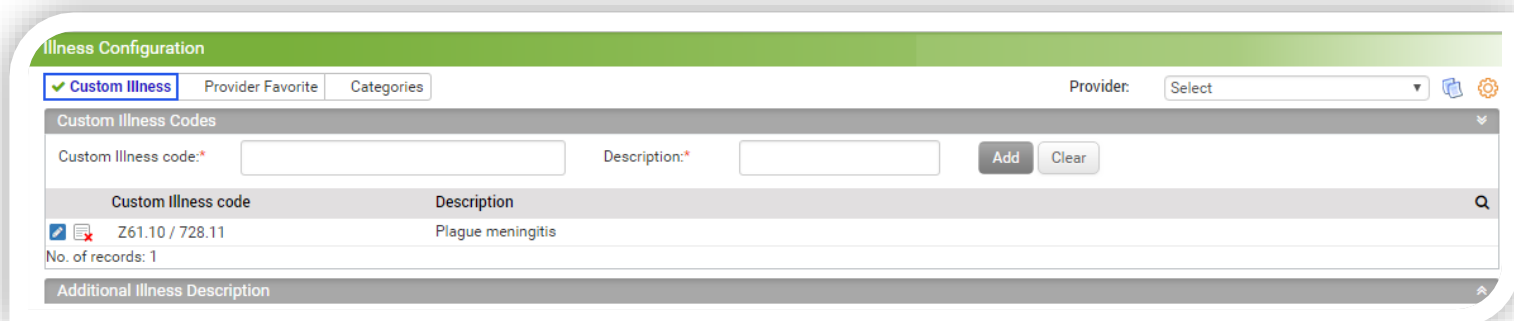
The screenshot shows the 'Illness Configuration' window with the 'Custom Illness' tab selected. Below the 'Custom Illness Codes' section, the 'Additional Illness Description' section is active. It features a form with 'Illness:*' and 'Description:*' input fields, each with 'Add' and 'Clear' buttons. Below the form is a table with the following data:

Illness code	Description	No. of Additional Description
A01.00	Typhoid fever, unspecified	1

Below the table, there is another 'Description' input field with an 'Add' button. The table shows one record for 'Typhoid fever, unspecified' with 1 additional description.

Custom Illness Codes

This section facilitates you to add custom illness codes according to your requirement.



The screenshot shows the 'Illness Configuration' window with the 'Custom Illness' tab selected. Below the 'Custom Illness Codes' section, the 'Custom Illness Codes' section is active. It features a form with 'Custom Illness code:*' and 'Description:*' input fields, each with 'Add' and 'Clear' buttons. Below the form is a table with the following data:

Custom Illness code	Description
Z61.10 / 728.11	Plague meningitis

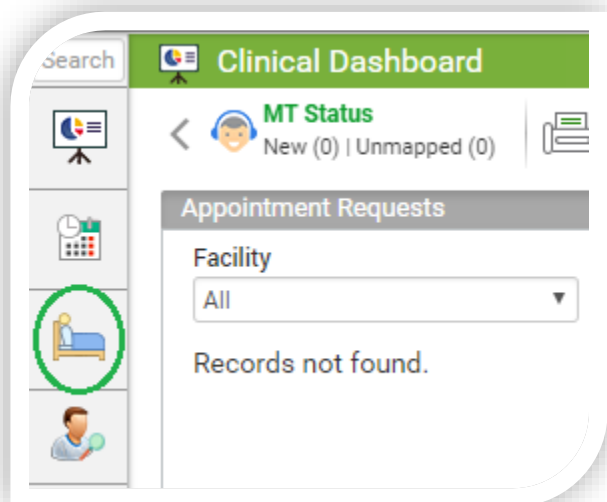
Below the table, there is another 'Description' input field with an 'Add' button. The table shows one record for 'Plague meningitis' with the code 'Z61.10 / 728.11'.

BED MANAGEMENT MODULE

[Back](#)

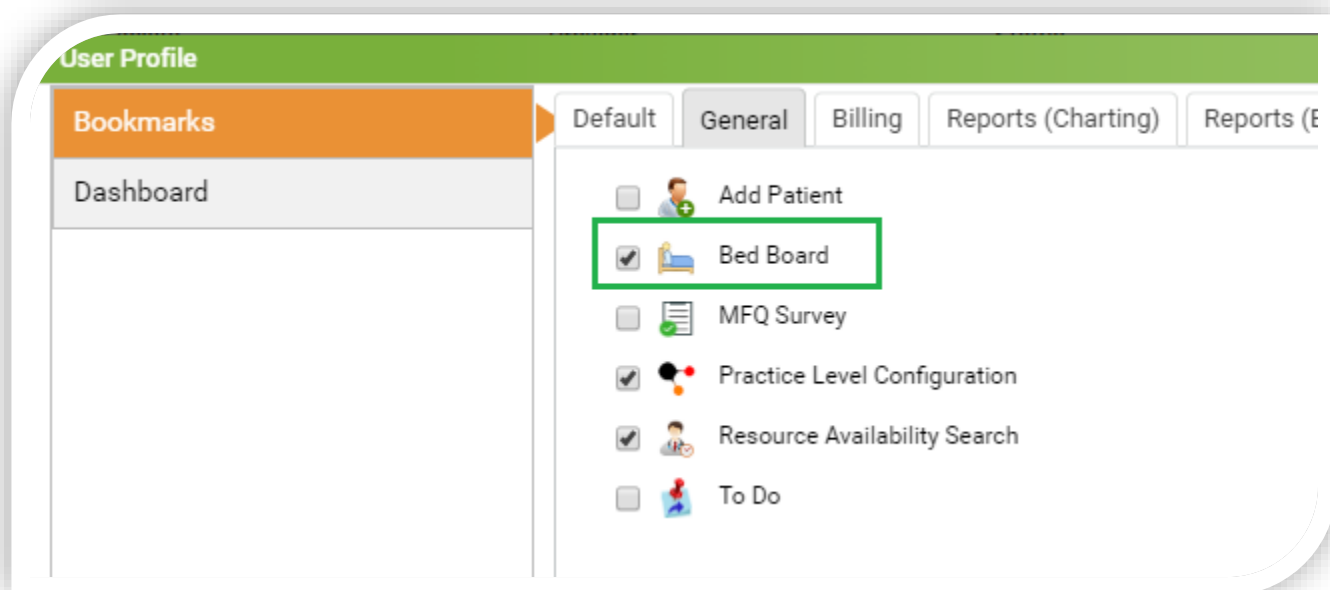
The Bed Management module allows practices to configure rooms and beds for inpatient treatment. The ability to document encounter notes is also available in the Bed Management module.

WORK WITH BED BOARD



The Bed Board icon can be accessed from the bookmarks in your left pane.

To have this icon appear in your bookmarks, you must configure it from the User Profile. *(To access the User Profile screen, from the Dashboard, click the orange wheel icon at the bottom left corner.)*



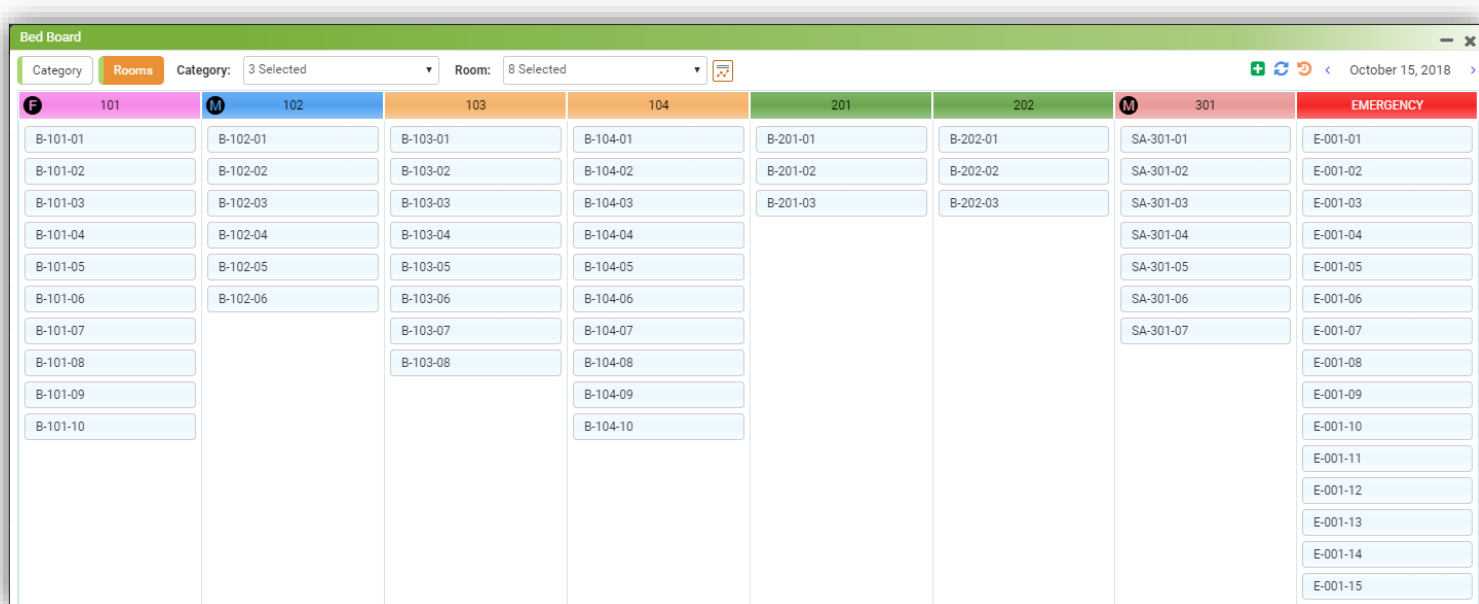
BED BOARD

When you click the Bed Board icon from your bookmarks, the following screen will appear showing Room details.

The CATEGORY tab will display all the categories you have configured in the Bed Board module. Categorizing your rooms by specialty is one of the examples of what to use categories for, you can configure various categories that will have different types of rooms. Rooms then can have different types of beds.



You must first configure the category and room details along with the colors you want to see for each category and room to display it in the following screen. Configuration section is explained later in this document.





Bed Board							
Category	Rooms	Category: 3 Selected	Room: 8 Selected	October 15, 2018			
F 101	M 102	103	104	201	202	M 301	EMERGENCY
B-101-01	B-102-01	B-103-01	B-104-01	B-201-01	B-202-01	SA-301-01	E-001-01
B-101-02	B-102-02	B-103-02	B-104-02	B-201-02	B-202-02	SA-301-02	E-001-02
B-101-03	B-102-03	B-103-03	B-104-03	B-201-03	B-202-03	SA-301-03	E-001-03
B-101-04	B-102-04	B-103-04	B-104-04			SA-301-04	E-001-04
B-101-05	B-102-05	B-103-05	B-104-05			SA-301-05	E-001-05
B-101-06	B-102-06	B-103-06	B-104-06			SA-301-06	E-001-06
B-101-07		B-103-07	B-104-07			SA-301-07	E-001-07
B-101-08		B-103-08	B-104-08				E-001-08
B-101-09			B-104-09				E-001-09
B-101-10			B-104-10				E-001-10
							E-001-11
							E-001-12
							E-001-13
							E-001-14
							E-001-15

Category drop-down: Choose one or more categories from the drop-down list that you want to see on the screen.

Room drop-down: Choose one or more rooms from the drop-down list that you want to see on the screen.

Click the  icon from top right corner to book a bed for the patient.

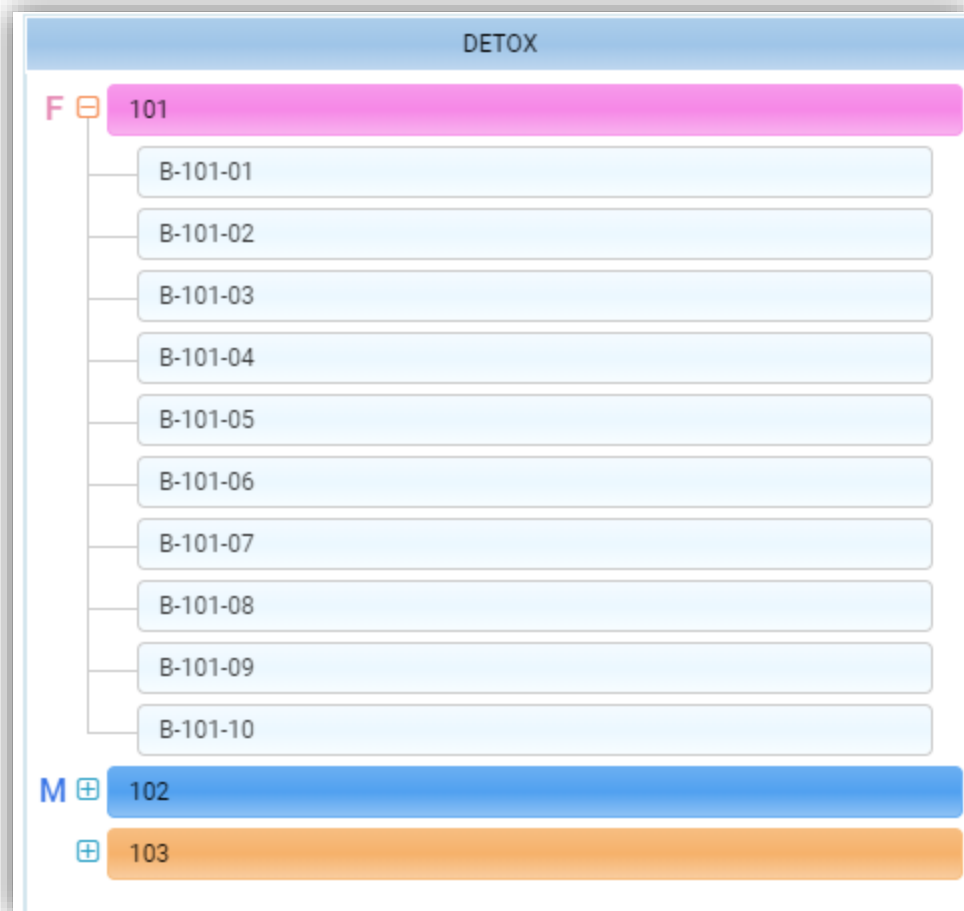
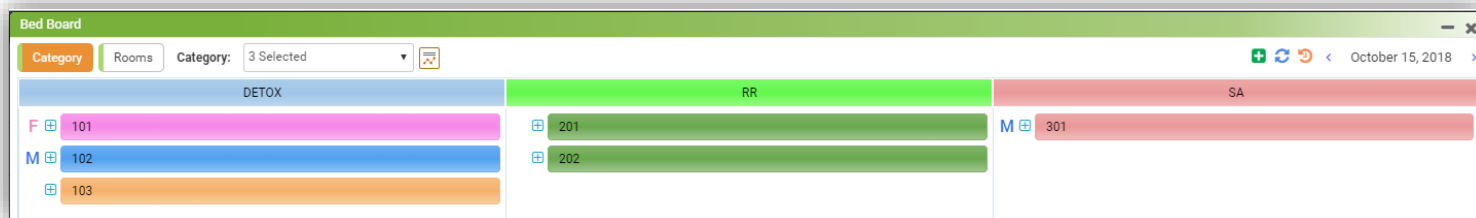
Click the Refresh icon  to view the most updated details on the screen.

Click the  icon to view the current day's bookings.

< October 06, 2018 >

Change the date from the top right corner and you will see the details of that specific day.

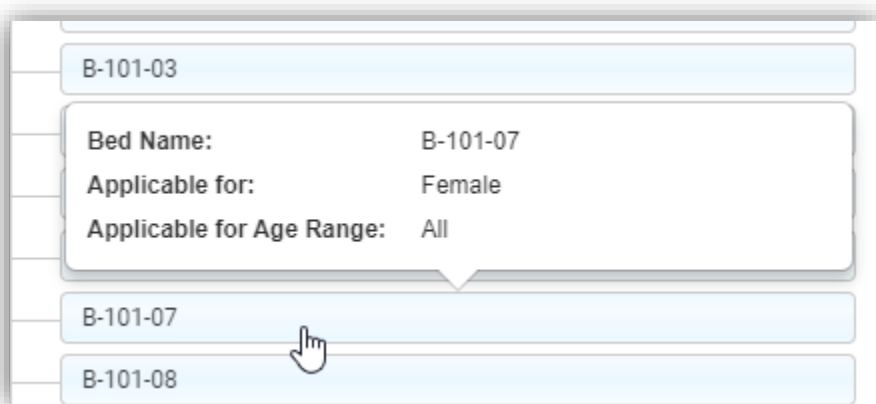
Category tab



Category will show all the room details along with for whom they are configured, male or female.

Expand the Room details by clicking the plus icon. This will show the beds configured in each room. You can then click the Bed button to book a bed for a patient.

When you hover your mouse pointer over the bed number, you will see the bed details such as whom it is applicable for?



Clicking the bed number will open the following screen that will allow you to book a bed for a patient. Fields with red asterisks are required.

Book Applicable for Sex : Female & Age : All

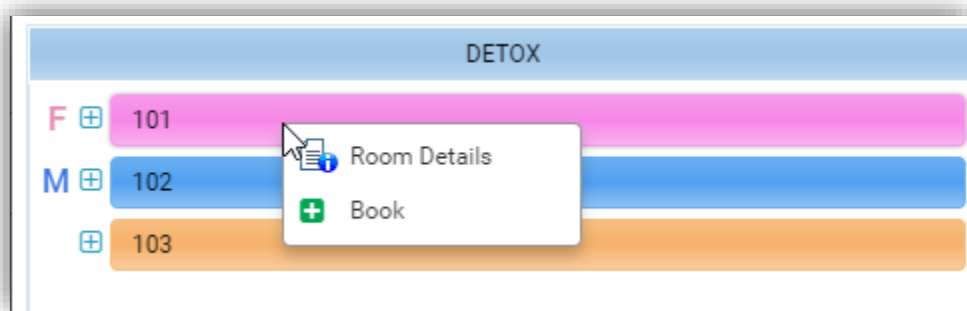
☐ Reserve a bed ✕

Patient Name:*	<input type="text"/>	Admit Date:*	<input type="text" value="10/15/2018"/>	Admit Time:*	<input type="text" value="08:20 PM"/>
Days:*	<input type="text"/>	Admit Till:	<input type="text"/>	Status:*	<input type="text" value="Select"/>
Category:	<input type="text" value="Select"/>	Room:	<input type="text" value="Select"/>	Bed:*	<input type="text" value="Select"/>
Comment:	<input type="text"/>				

Book

Reserve a bed: Select this check box to reserve this bed so that other user cannot book a bed for any other patient.

When you hover mouse over the Room number, you will see the Room Details link. Clicking the Room Details link will show following details:



- How many beds the room has
- How many of them are vacant
- Book button to book the vacant beds
- Patient and Encounter details for booked beds along with checked in and expected check out dates

Rooms: This tab will display all the rooms you have configured in the Bed Board module. As explained in the Category section above, you can click the Bed number to book a bed for a patient. Once you book the bed for a patient, the patient name will appear in the box.

Bed Board					
Category	Rooms	Category: 3 Selected	Room: 8 Selected		
F 101	M 102	103	104	201	
B-101-01	B-102-01	B-103-01	B-104-01	B-201-01	
B-101-02	B-102-02	B-103-02	B-104-02	B-201-02	
B-101-03	B-102-03	B-103-03	B-104-03	B-201-03	
Smith, Susan	B-102-04	B-103-04	B-104-04		
B-101-05	B-102-05	B-103-05	B-104-05		
Smith, Candice	B-102-06	B-103-06	B-104-06		
B-101-07		B-103-07	B-104-07		
B-101-08		B-103-08	B-104-08		
B-101-09			B-104-09		
B-101-10			B-104-10		

Smith, Candice

Blue color with the strip on the far left indicates that the patient is already admitted, and this bed is occupied.

Smith, Susan

Blue color without strip indicates that the patient has a pending appointment for this bed.

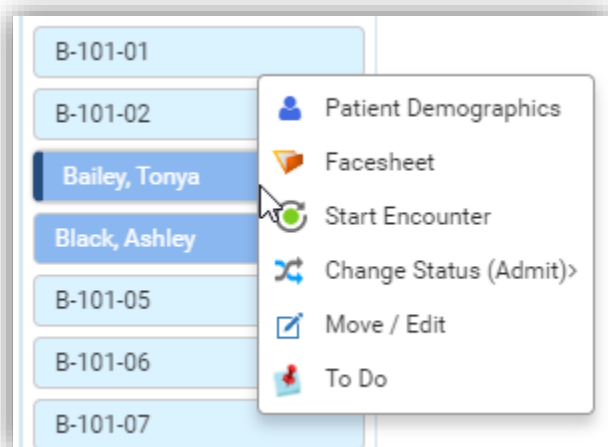
B-101-02

Light blue color indicates that the bed is vacant, and you can book the bed for any patient.

RESERVED

When you reserve any bed, it will appear with the RESERVED tag as shown above.

When you click on the booked bed, you will find more options such as:

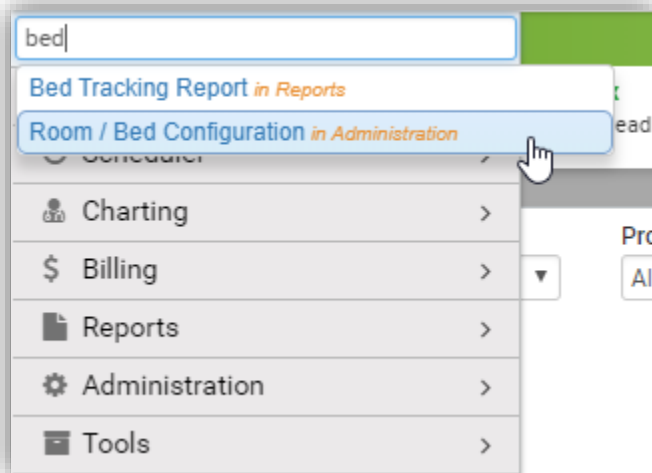


- Patient Demographics
- Facesheet
- Start encounter
- Change status to check out
- Move patient to another bed
- Access To Dos

ROOM / BED CONFIGURATION

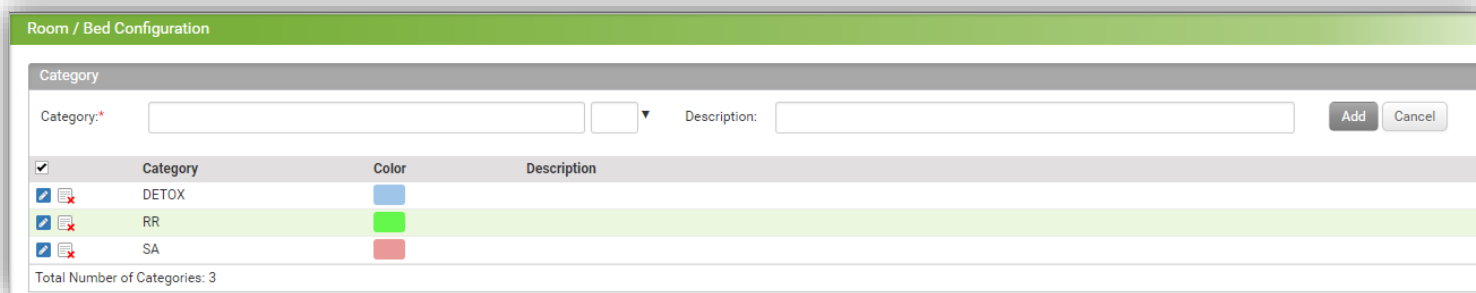
To work with the Bed Board module, you must first configure the category and room details.

Type in 'bed' in the top left smart search box, and then select the 'Room / Bed Configuration' option as shown in the adjacent screen.



On the Room / Bed Configuration screen, you will see 2 panels: Category and Room & Bed.

Expand the Category panel, add the category details you want and assign a color for each category. Accordingly, it will appear in the Bed Board module.



Expand the 'Room & Bed' panel to configure room and bed details.

Look at the below screen. You can first configure the rooms for specific facility, category, sex, and age. Also, you can define a color for each room, to display it accordingly in the Bed Board module.

Room / Bed Configuration

Category: ▼

Room & Bed

Room: ▼ Facility: Select ▼ Category: Select ▼ Age: All ▼ To All ▼ Sex: Select ▼

Search Cancel Add

Room	Color	Facility	Category	Age From	Age To	Sex
101		InSync Facility	DETOX	All	All	Female

Bed: Age: All ▼ To All ▼ Sex: Female ▼ Add Cancel

Bed	Age From	Age To	Sex
B-101-01	All	All	Female
B-101-02	All	All	Female
B-101-03	All	All	Female
B-101-04	All	All	Female
B-101-05	All	All	Female
B-101-06	All	All	Female
B-101-07	All	All	Female
B-101-08	All	All	Female
B-101-09	0	18	Female
B-101-10	0	18	Female


Total Number of Beds: 10

Room	Color	Facility	Category	Age From	Age To	Sex
102		InSync Facility	DETOX	All	All	Male
103		InSync Facility	DETOX	All	All	All

Within the rooms, you can add bed details for specific age and sex.

Once you configure the necessary categories, rooms, and beds successfully, you can work with the Bed Board module.

BED TRACKING REPORT

The Bed Tracking Report can be accessed from the Reports tab in the left pane. Alternatively, you can also generate the report from the Bed Board module by clicking the  icon.

Bed Tracking Report

Filter Data

Patient Name: Patient Category: Select ▼ Facility: Select ▼

Room Category: Select ▼ Room: Select ▼ Bed: Select ▼

Age From: Select ▼ To Select ▼ Status: Select ▼

Admit Date: To Discharge date: To

Export Data Clear

Select the appropriate details on the report and then click the Export Data button. The details will be sent to the excel.

NEW FLOWSHEET MODULE

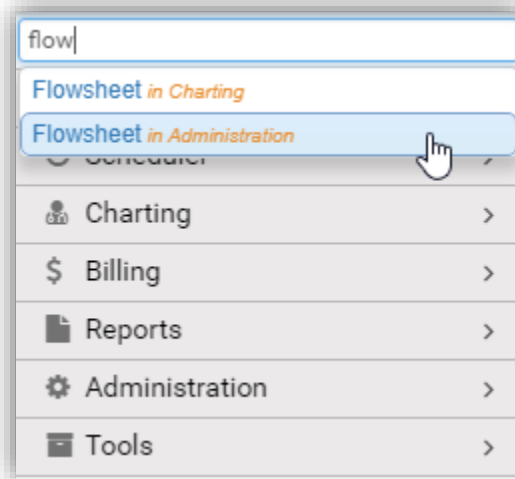
[Back](#)

InSync now includes a new Flowsheet module within the encounter to capture different data sets over a period of time/encounters. A good example of using a Flowsheet would be for tracking exercises in Physical Therapy over multiple visit dates.

FLOWSHEET CONFIGURATION

To use the Flowsheet module, you must first configure the required data points or exercises.

Type in 'flow' in the top left smart search box, and then select the 'Flowsheet' option as shown in the adjacent screen.



In the Flowsheet Configuration, you can add various exercises by adding details such as, Exercise name, Sex, and Age. Once you add the exercises, they will appear as shown below.

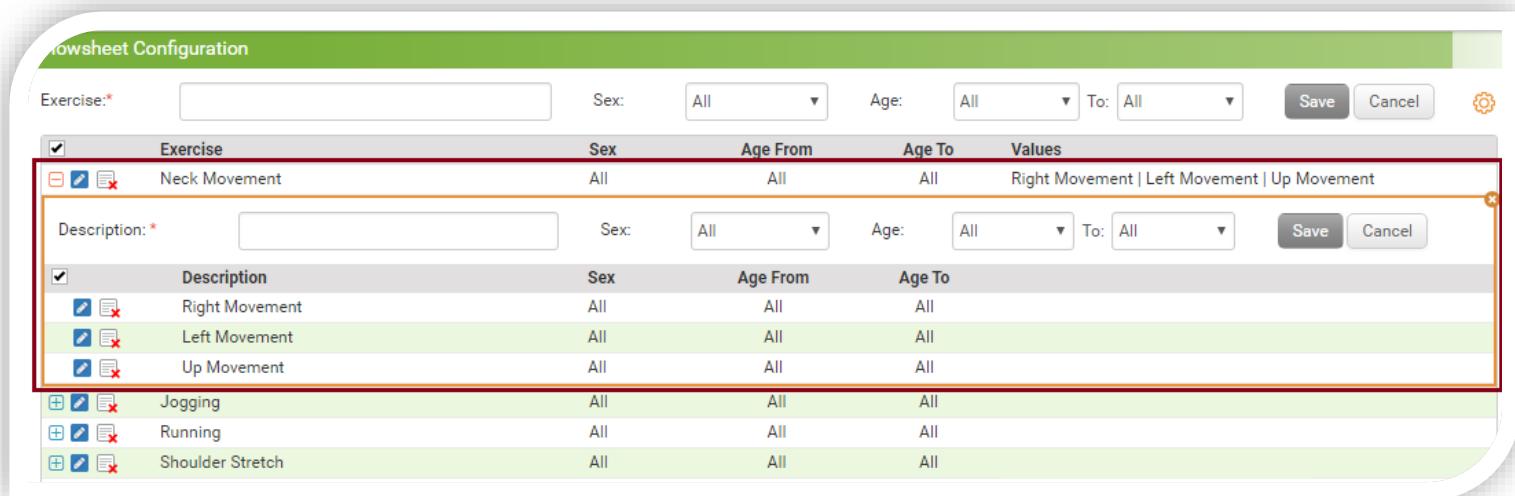
Flowsheet Configuration					
Exercise:	<input type="text"/>	Sex:	<input type="text" value="All"/>	Age:	<input type="text" value="All"/> To: <input type="text" value="All"/>
<input type="button" value="Save"/>	<input type="button" value="Cancel"/>				
<input checked="" type="checkbox"/>	Exercise	Sex	Age From	Age To	Values
<input checked="" type="checkbox"/>	Toe Walk	All	All	All	
<input checked="" type="checkbox"/>	Heel Walk	All	All	All	
<input checked="" type="checkbox"/>	General Exercise	All	All	All	
<input checked="" type="checkbox"/>	Neck Movement	All	All	All	Right Movement Left Movement Up Movement
<input checked="" type="checkbox"/>	Jogging	All	All	All	
<input checked="" type="checkbox"/>	Running	All	All	All	
<input checked="" type="checkbox"/>	Shoulder Stretch	All	All	All	
<input checked="" type="checkbox"/>	Body Movement	All	All	All	
Total Number of Records: 8					

- To expand the exercise details, click the ☒ icon. After expanding the exercise, you can add one or more descriptions for each exercise as per your requirement.
- To change the exercise details, click the Edit icon ☒.
- To inactivate the exercise details, click the Inactivate icon ☒. Refer to the following screenshot.

Call 877-346-7962 for customer service or e-mail us at support@insynchcs.com.

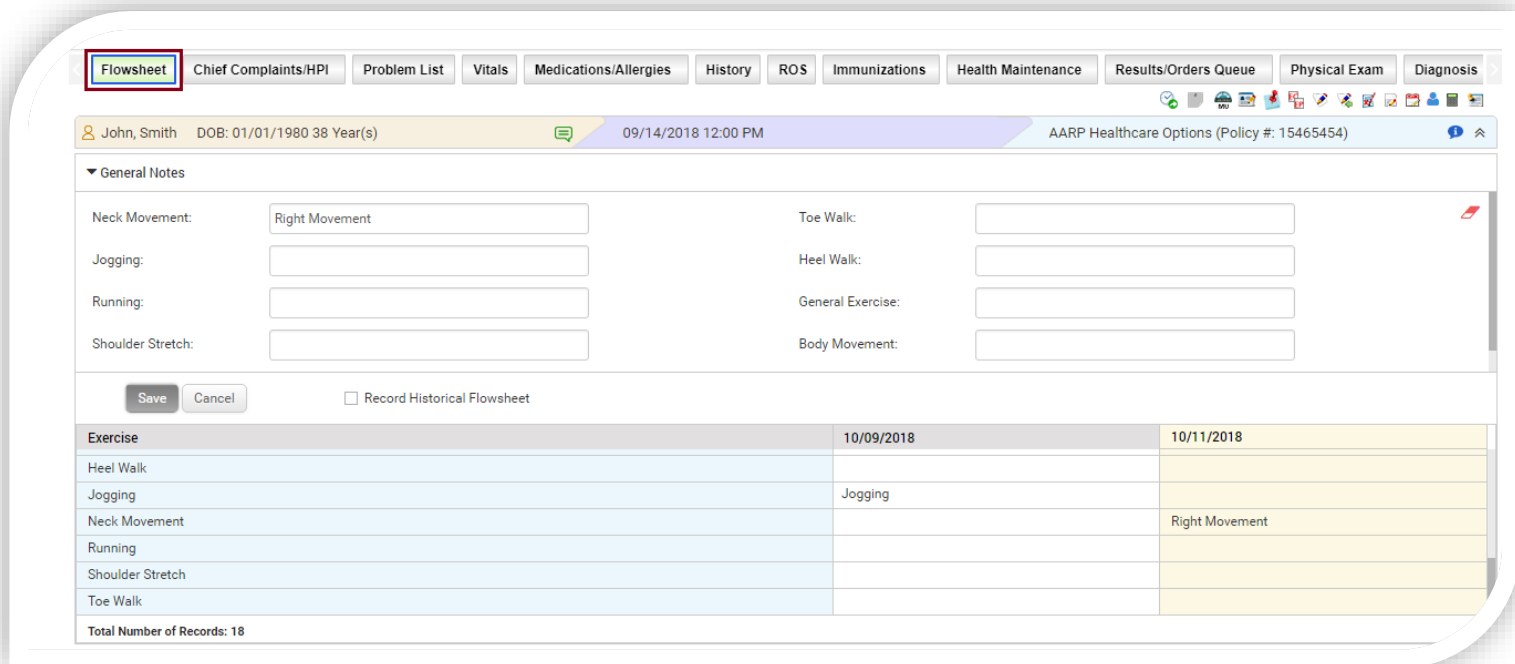
Page 19 of 52

Go to [TOP](#)



Flowsheet in Charting

The Flowsheet module in charting will appear as shown in the following screenshot:



SPEECH THERAPY: ABILITY TO DOCUMENT SPEECH SYMBOLS

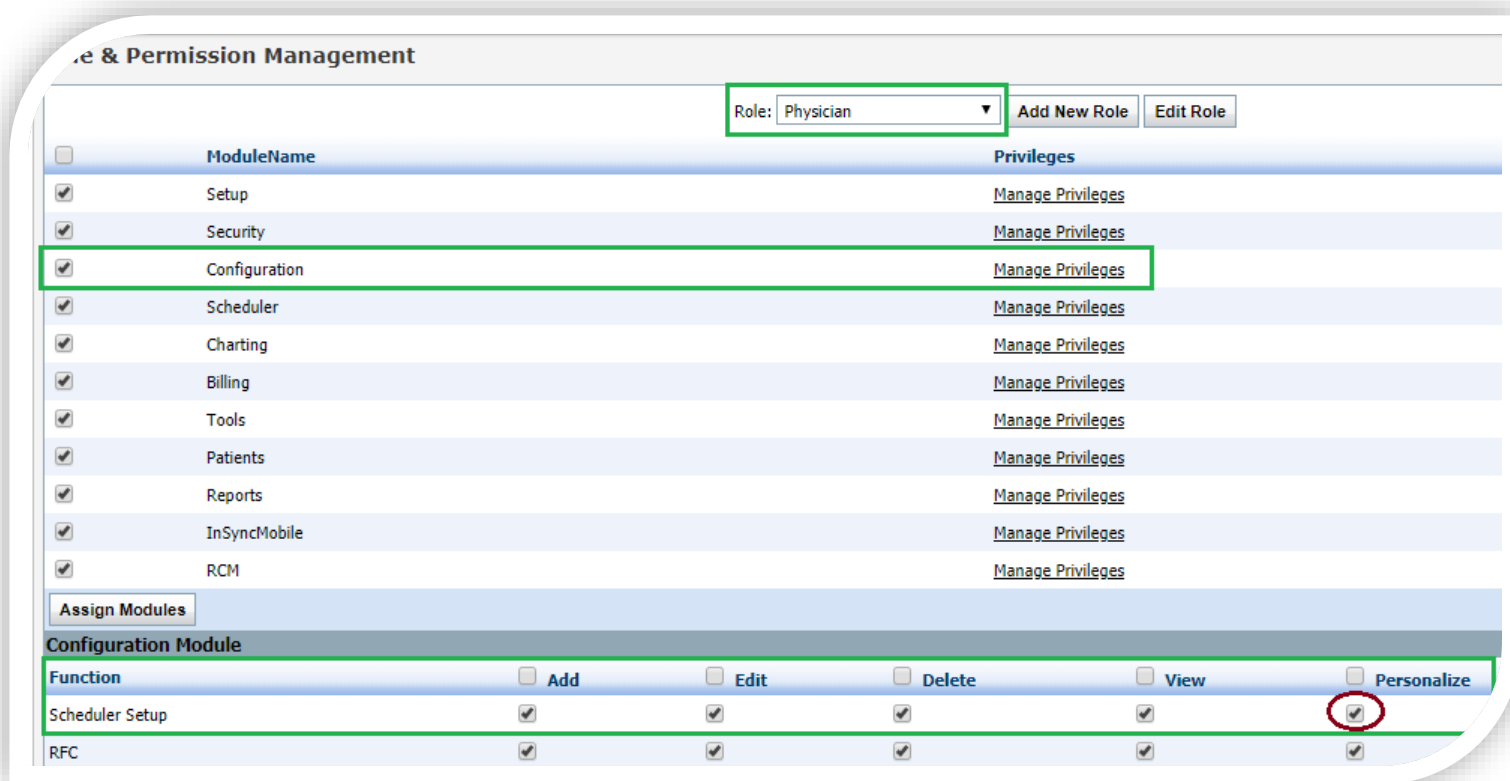
[Back](#)

InSync now allows the documentation of speech (phonetic) symbols into Encounter Notes. A user can now copy and paste these symbols into the General Notes of the encounter without a problem. The symbols can also be configured as checkbox selections in locations such as the Exam part of the encounter.

CONFIGURE SCHEDULER BASED ON ROLE

Before only the practice admin user login had access to configure schedulers for all the resources. Now, if you want any other users of the practice to have the same permission, you can select the Personalize option for that specific role for Scheduler Setup function. Refer to the following screen:

To assign permissions, expand left pane, go to Administration > Roles & Permissions. Select the role from top and then select the Personalize option for the Scheduler Setup function.



Role & Permission Management

Role: Physician Add New Role Edit Role

ModuleName	Privileges
<input checked="" type="checkbox"/> Setup	Manage Privileges
<input checked="" type="checkbox"/> Security	Manage Privileges
<input checked="" type="checkbox"/> Configuration	Manage Privileges
<input checked="" type="checkbox"/> Scheduler	Manage Privileges
<input checked="" type="checkbox"/> Charting	Manage Privileges
<input checked="" type="checkbox"/> Billing	Manage Privileges
<input checked="" type="checkbox"/> Tools	Manage Privileges
<input checked="" type="checkbox"/> Patients	Manage Privileges
<input checked="" type="checkbox"/> Reports	Manage Privileges
<input checked="" type="checkbox"/> InSyncMobile	Manage Privileges
<input checked="" type="checkbox"/> RCM	Manage Privileges

Assign Modules

Configuration Module

Function	<input type="checkbox"/> Add	<input type="checkbox"/> Edit	<input type="checkbox"/> Delete	<input type="checkbox"/> View	<input type="checkbox"/> Personalize
Scheduler Setup	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
RFC	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

PATIENT SEARCH: ABILITY TO CONFIGURE CERTAIN FIELDS

On the Patient Search screen grid, you are now able to hide certain fields from being visible.

These are the fields:

DOB | Sex | External MRN | Provider | Address | Payer | e-RIN


To hide these fields, remove the checkboxes next to them as shown in following screenshot. In this example, e-RIN will not appear on the Patient Search grid.

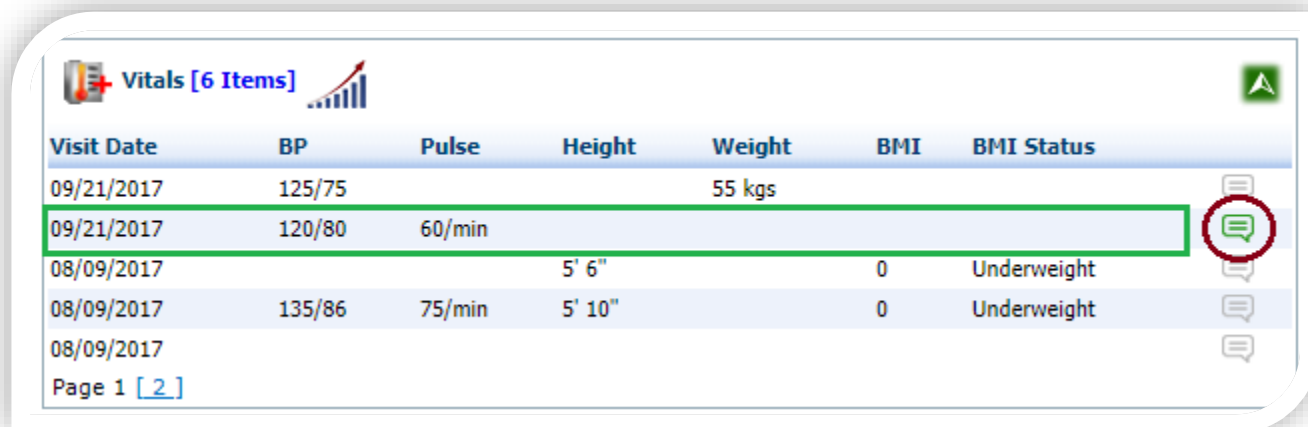
To hide these details, expand left panel, select Administration > General > Patient Demographics > Configure Patient List Fields section. You can then clear the check box for the field that you don't want to appear on the Patient Search screen.






Configure Patient List Fields

Patient Fields	Display
DOB	<input checked="" type="checkbox"/>
Sex	<input checked="" type="checkbox"/>
External MRN	<input checked="" type="checkbox"/>
Provider	<input checked="" type="checkbox"/>
Address	<input checked="" type="checkbox"/>
Payer	<input checked="" type="checkbox"/>
e-RIN	<input type="checkbox"/>

VITALS: ABILITY TO ADD NOTES VIA FACESHEET

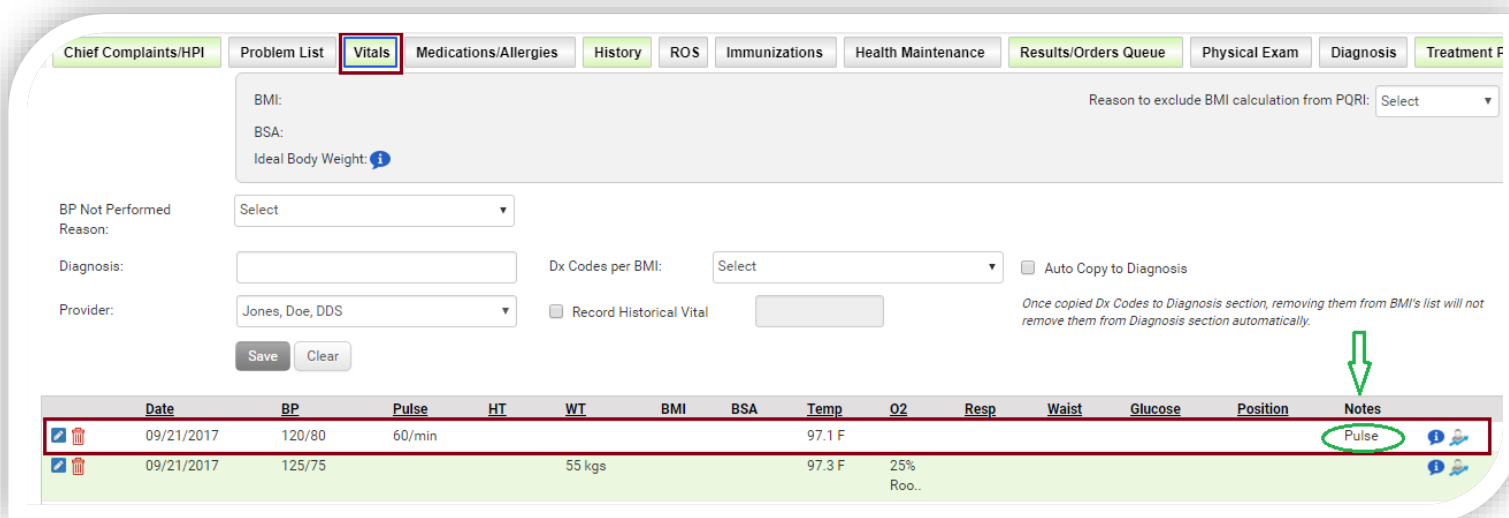
When you access Vitals from the Facesheet, you will now notice a new 'Notes' icon on the far right. You can now add notes by clicking this gray icon . The icon will turn to green once the note is added. Refer to the following screenshot:



Visit Date	BP	Pulse	Height	Weight	BMI	BMI Status	Notes
09/21/2017	125/75			55 kgs			
09/21/2017	120/80	60/min					
08/09/2017			5' 6"		0	Underweight	
08/09/2017	135/86	75/min	5' 10"		0	Underweight	
08/09/2017							

Page 1 [2]


When within the encounter, the Notes can also be seen as shown below:



Chief Complaints/HPI | Problem List | **Vitals** | Medications/Allergies | History | ROS | Immunizations | Health Maintenance | Results/Orders Queue | Physical Exam | Diagnosis | Treatment Plan

BMI: Reason to exclude BMI calculation from PQRI: Select

BSA:

Ideal Body Weight: 










BP Not Performed Reason: Select

Diagnosis: Dx Codes per BMI: Select ☐ Auto Copy to Diagnosis

Provider: Jones, Doe, DDS ☐ Record Historical Vital

Save Clear

Once copied Dx Codes to Diagnosis section, removing them from BMI's list will not remove them from Diagnosis section automatically.

Date	BP	Pulse	HT	WT	BMI	BSA	Temp	O2	Resp	Waist	Glucose	Position	Notes
 	09/21/2017	120/80	60/min				97.1 F						 Pulse  
 	09/21/2017	125/75		55 kgs			97.3 F	25%	Roo..				 

ABILITY TO COLLECT COPAYS AND GENERATE SUPERBILLS FOR ALL APPOINTMENT STATUSES

Before, the Superbill icon was displayed only for checked-in appointments. Now, a Superbill icon is visible for all appointment statuses. A good example of using this going forward would be practices who like to create superbills for NO SHOW appointments.

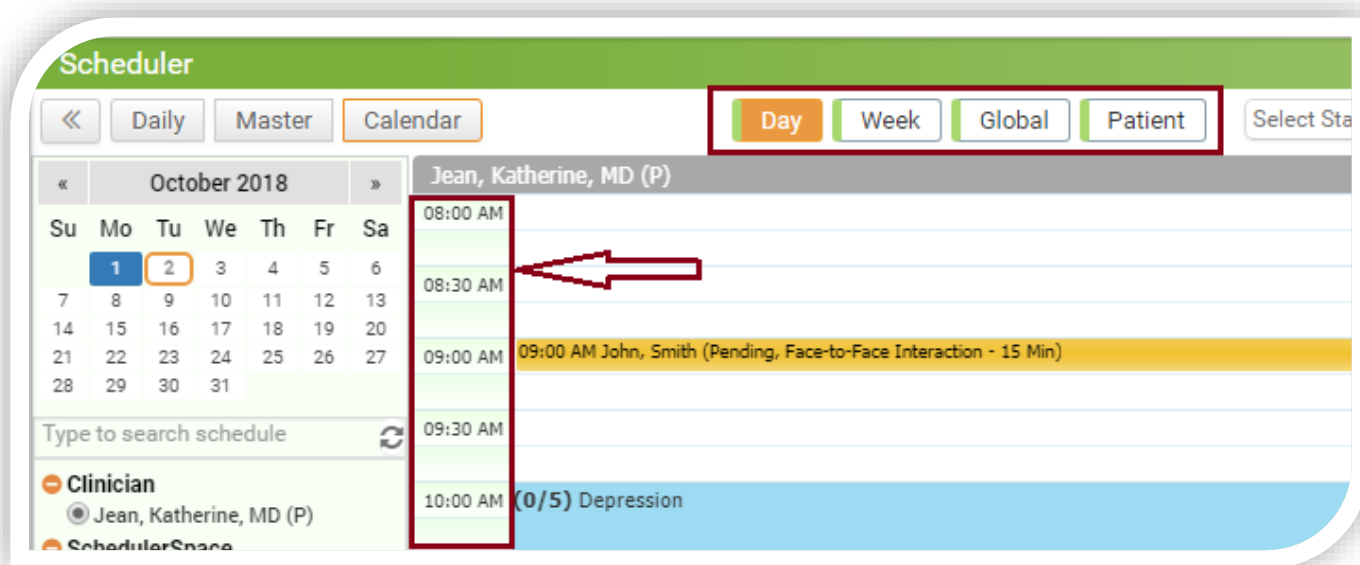
The Superbill icon will appear for all Appointment Statuses except for Cancelled ones. Similarly, copay option will be available for all Appointment Statuses except Cancelled ones.

APPOINTMENT REMINDERS: ABILITY TO USE PROVIDER'S OTHER NAME FIELD

When sending Appointment Reminders, InSync can now use the field OTHER NAME from within the Provider's details in Resource Management. The tag for OTHER NAME has to be added into your appointment reminder script.

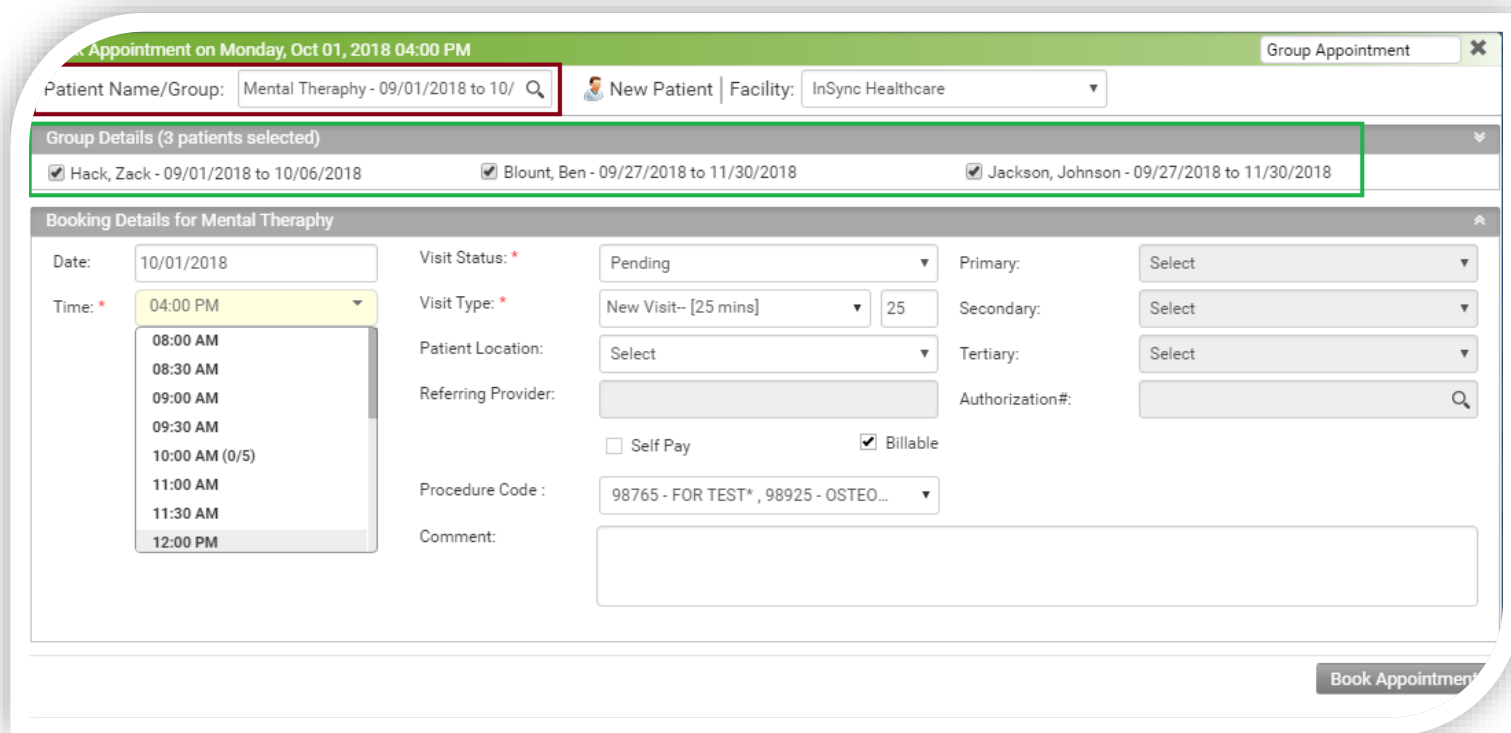
SCHEDULER: ADDITION OF AM/PM TO EACH TIME SLOT

The addition of AM/PM to all time slots are introduced to assist practices who are open 24 hours a day with easily identifying which part of the day the time slot belongs to.



GROUP APPOINTMENTS: ENHANCED BOOKING OPTION

When booking a group appointment on the fly you are now able to book a preconfigured group.




The screenshot shows the 'Appointment on Monday, Oct 01, 2018 04:00 PM' window. The 'Patient Name/Group' field contains 'Mental Therapy - 09/01/2018 to 10/'. The 'Group Details (3 patients selected)' panel lists three patients: Hack, Zack; Blount, Ben; and Jackson, Johnson. The 'Booking Details for Mental Therapy' panel shows the date as 10/01/2018, time as 04:00 PM, and visit status as Pending. The 'Book Appointment' button is visible at the bottom right.

Type in a group name in the box and a list of groups will appear. Select a group for which you want to book an appointment. Locate all the patients of that group listed in the Group Details panel. If you do not want to include some of the patients, you can clear the check box for those patients.

CLOSED ENCOUNTER DATE/TIME ON TREATMENT PLAN LETTER

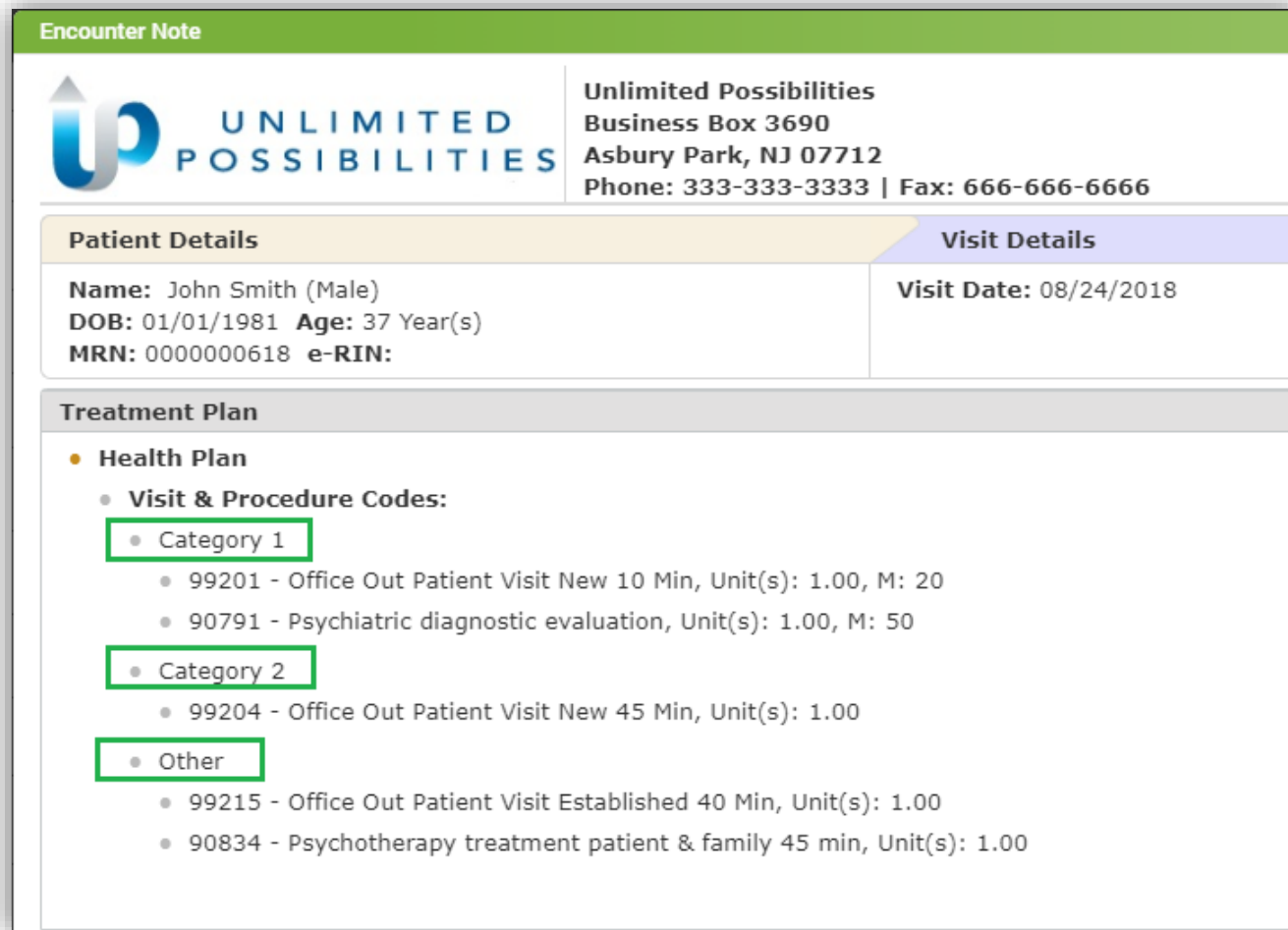
Before, when you printed the Treatment Plan Letter, InSync would display the time of when you printed it now when the provider and/or patient signed it.

Now, the date/time will be displayed based on when the encounter note was signed. If the encounter note is still in progress the date/time will still be the system time of when you printed the letter.

Patient Details	Visit Details
Name: John Smith DOB: 02/14/1989 Age: 29 Year(s) MRN: 0000003814 e-RIN: 12345	Visit Date: 10/02/2018 Referring Provider: Vi
Treatment Plan New OrderSet for SKB	
Visit & Procedure Codes <ul style="list-style-type: none"> OSTEOPATHIC MANIPULATIVE TX 1-2 BODY REGIONS, Unit(s): 1.00, M: 22 OSTEOPATHIC MANIPULATIVE TX 5-6 BODY REGIONS, Unit(s): 1.00, M: 52, 10 	
	
Electronically Signed by Katherine Jean, MD on 10/03/2018 09:34 PM	
Patient Signature	

ENCOUNTER NOTE PREVIEW: ABILITY TO DISPLAY TREATMENT PLAN WITH CATEGORIES VISIBLE

On the Encounter Note, you can now view the Treatment Plan items displayed by category. Refer to the following screenshot:



Encounter Note

UNLIMITED POSSIBILITIES
 Unlimited Possibilities
 Business Box 3690
 Asbury Park, NJ 07712
 Phone: 333-333-3333 | Fax: 666-666-6666

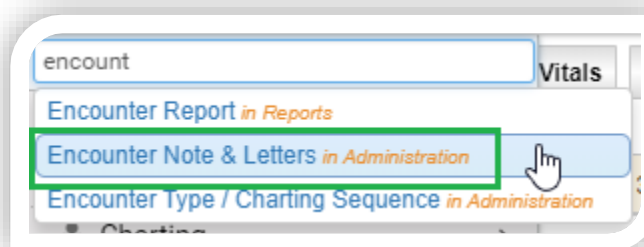
Patient Details	Visit Details
Name: John Smith (Male) DOB: 01/01/1981 Age: 37 Year(s) MRN: 0000000618 e-RIN:	Visit Date: 08/24/2018

Treatment Plan

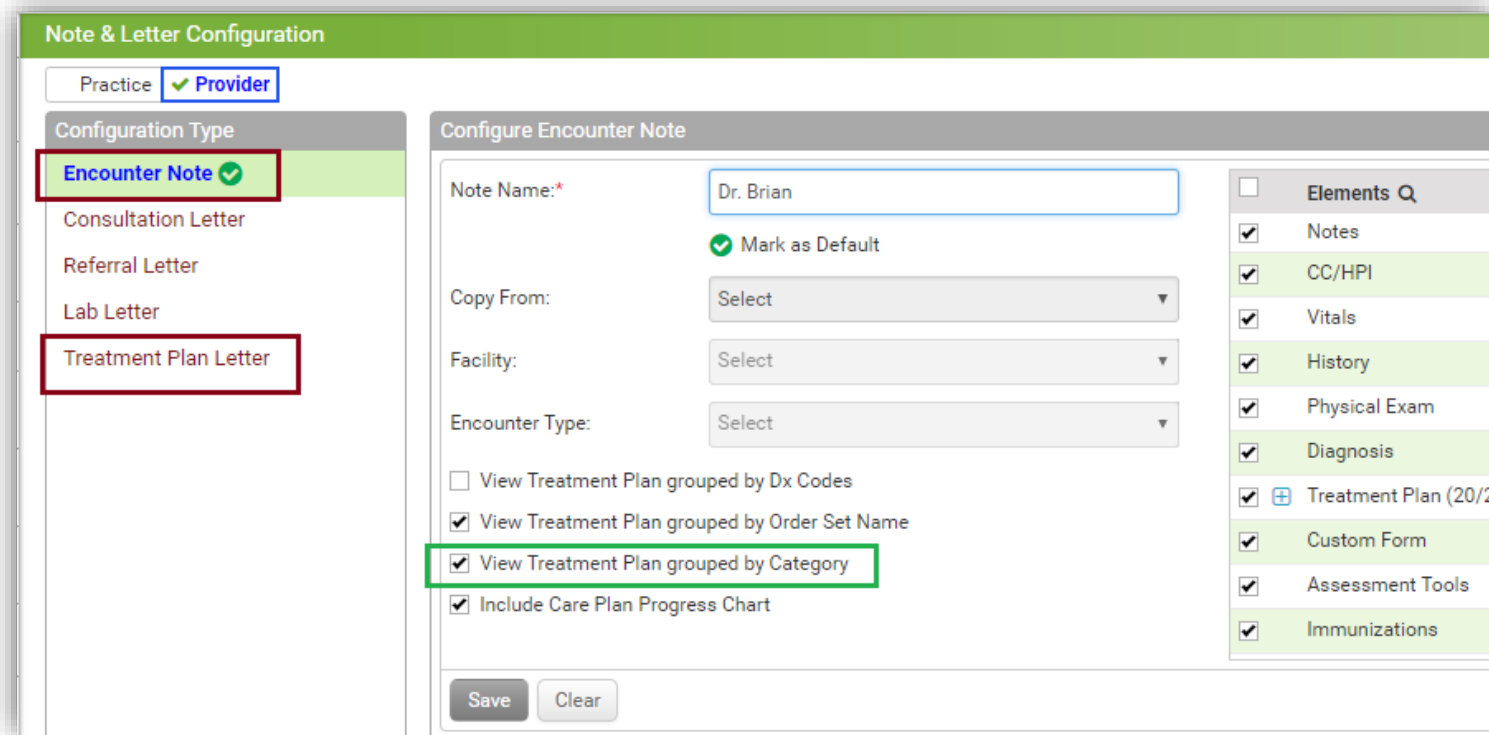
- **Health Plan**
 - **Visit & Procedure Codes:**
 - **Category 1**
 - 99201 - Office Out Patient Visit New 10 Min, Unit(s): 1.00, M: 20
 - 90791 - Psychiatric diagnostic evaluation, Unit(s): 1.00, M: 50
 - **Category 2**
 - 99204 - Office Out Patient Visit New 45 Min, Unit(s): 1.00
 - **Other**
 - 99215 - Office Out Patient Visit Established 40 Min, Unit(s): 1.00
 - 90834 - Psychotherapy treatment patient & family 45 min, Unit(s): 1.00

To view the Treatment Plan items by category, you must first configure it in the Note & Letter Configuration screen.

In top left smart search box, type in “encounter” and then click “Encounter Note & Letters”.



On the Note & Letter Configuration screen, select the “View Treatment Plan grouped by Category” check box.



Note & Letter Configuration

Practice ☒ Provider

Configuration Type

- Encounter Note** ✓
- Consultation Letter
- Referral Letter
- Lab Letter
- Treatment Plan Letter**

Configure Encounter Note

Note Name:*

☒ Mark as Default

Copy From:

Facility:

Encounter Type:

☐ View Treatment Plan grouped by Dx Codes

☒ View Treatment Plan grouped by Order Set Name

☒ **View Treatment Plan grouped by Category**

☒ Include Care Plan Progress Chart

Elements

- ☒ Notes
- ☒ CC/HPI
- ☒ Vitals
- ☒ History
- ☒ Physical Exam
- ☒ Diagnosis
- ☒ ☒ Treatment Plan (20/2)
- ☒ Custom Form
- ☒ Assessment Tools
- ☒ Immunizations

💡 Similarly, you will also view the Treatment Plan items per category in the Treatment Plan Letter if you have configured it from the above screen.

PATIENT MEDICATION REPORT: NEW MRN FIELD

When you export the Patient Medication Report to excel, you will NOW find the MRN in the excel file.

Patient Medication

Filter Data

Patient Name:

Patient Category:

Medication:

Provider:

Prescription Date:

To

Discontinue Date:

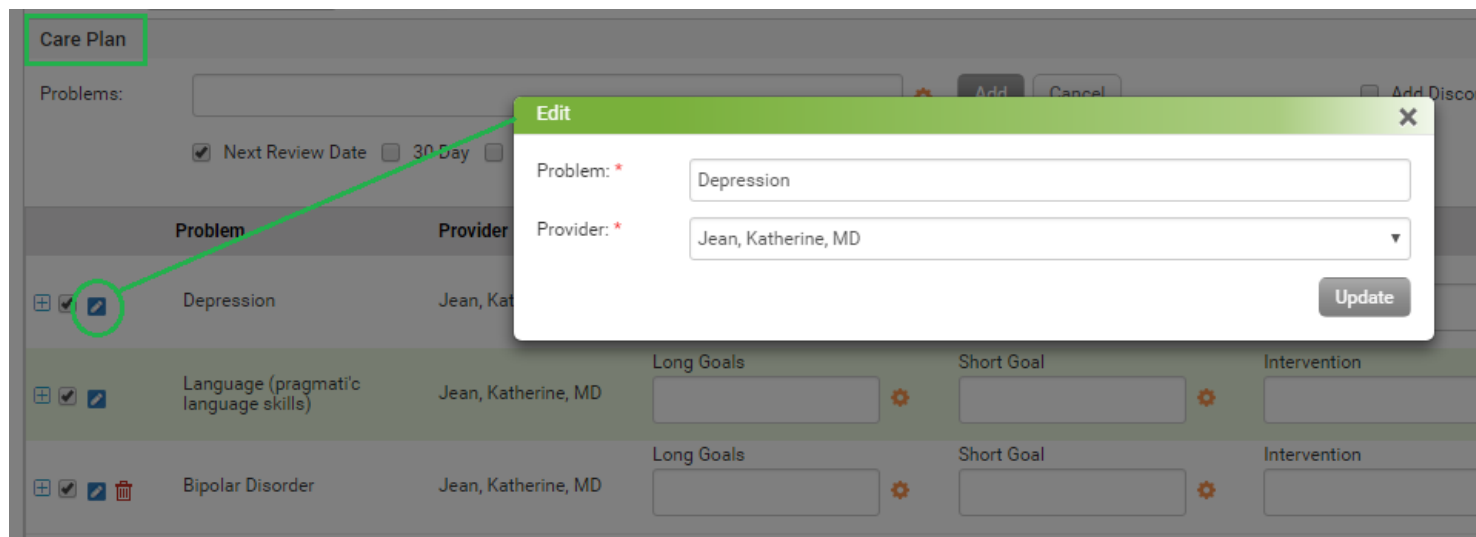
Export Data

Clear

	A	B	C	D
1	MRN	Patient First Name	Patient Last Name	Sex
2	0000000616	JOHN	SMITH	Male
3	0000000625	JACK	DOE	Male
4	0000000714	KATE	BOX	Female
5	0000000899	KELLY	WARNER	Female

CARE PLAN: ABILITY TO CHANGE PROVIDER NAME FOR EACH PROBLEM

In the Care Plan module, you can now change the provider name as well as edit the problem name from the same screen for each problem:



PORTAL ACCESS FOR INACTIVE PATIENTS

When you are deactivating a patient in InSync, you will now be asked if you would like to block patient portal access or leave it granted. Inactive patients will have the option to maintain patient portal access. This is done on a patient by patient basis.

PATIENT INSTRUCTIONS IN PORTAL WHEN SENDING APPOINTMENT REQUESTS

The practice is now able to configure custom messages and alerts as shown below. When a patient is requesting an appointment via the patient portal they would be able to view these messages.

Appointment Request

ATTENTION: When sending a request for an appointment please include which days and times works best for you using the box below. We will try our best to accommodate your request. Please also include if there has been any change to your insurance coverage.

Location:

Provider:

Date* :

InSync Healthcare

Jean, Katherine, MD

10/05/2018

IMPORTANT: If you do not see your provider's name listed above then this means that there are no available appointments for that date. Please select a different date or a different provider.

☐ I am flexible for timings as per the provider's availability.

Reason for Appointment* :

Available Time*


☐ 08:00 AM
 ☐ 08:30 AM
 ☐ 09:00 AM
 ☐ 09:30 AM
 ☐ 11:00 AM
 ☐ 11:30 AM


Send Request

Cancel

A common example of a message a practice may configure could be:

“If it is a medical emergency, please call 911 or go to the nearest emergency room. If experiencing a crisis, please call our office instead of requesting an appointment”.


To configure these messages, go to the Practice Level Configuration screen by clicking  icon from the bookmarks and expand the ‘Portal’ panel. In the following screen, type in the instructions that you want the patient portal users should see while sending an appointment request.

 Instructions while requesting appointment:

Attention

Important






COPY ACCIDENT INFORMATION FROM PREVIOUS ENCOUNTER

InSync now allows you to copy patient's accident details from the previous encounter. When you click the  button from Facesheet, the 'Copy Accident Information' check box appears at the end. To copy the accident details, select this check box.

Copy From Previous Encounter

Patient Details: Smith, John DOB: 02/14/1989 Encounter Details: 10/02/2018 01:30 PM Insurance Details Patient Photo

Previous Encounters ☐ Filter Notes



Visit Date & Time	Encounter Type	Provider	Facility Name	Status	Select	Encounter Note
08/17/2018 01:00 PM	Face-to-Face Interaction	Jean, Katherine, MD	InSync Healthcare	Closed	Select	
07/30/2018 01:49 PM	Treatment Plan	Jean, Katherine, MD	InSync Healthcare	In Progress	Select	
02/21/2018 05:50 PM	Transcribed Note	Jean, Katherine, MD	InSync Healthcare	Closed	Select	
02/21/2018 05:45 PM	New Encounter With Snomed	Jean, Katherine, MD	InSync Healthcare	Closed	Select	
02/02/2018 07:17 PM	Treatment Plan	Patel, Vicky's A, RNFA, APN	InSync Healthcare	In Progress	Select	

Page 1 [2] [3]


☐ Charting Elements

- CC/HPI
- ROS
- ☐ Health Check-Up
- Diagnosis
- Treatment Plan
- Therapy Notes
- Procedures

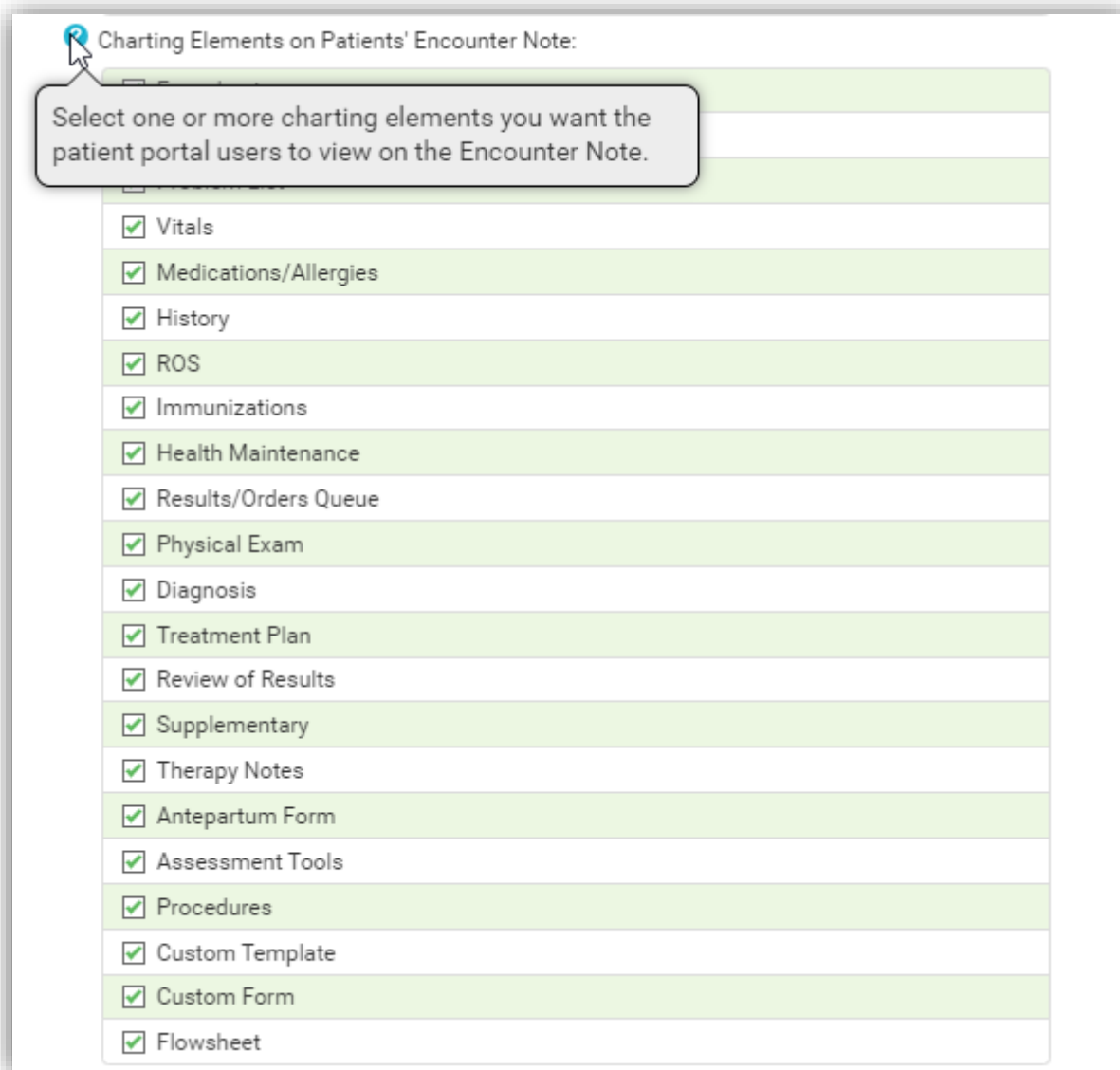
☒ Copy Accident Information
 Accident Type: Accident State: Accident Date:

Copy & Append  Copy & Replace 

ABILITY TO CONFIGURE WHICH ENCOUNTER NOTE ELEMENTS ARE VISIBLE ON THE PORTAL

The practice can now decide which charting elements of the provider's encounter should be displayed on the patient portal. To do this, go to the Practice Level Configuration screen by clicking  icon from the bookmarks and expand the 'Portal' panel.

In the 'Charting Elements on Patients' Encounter Note' section, choose the charting elements you want to allow your patients to see in their Encounter Notes on the portal.




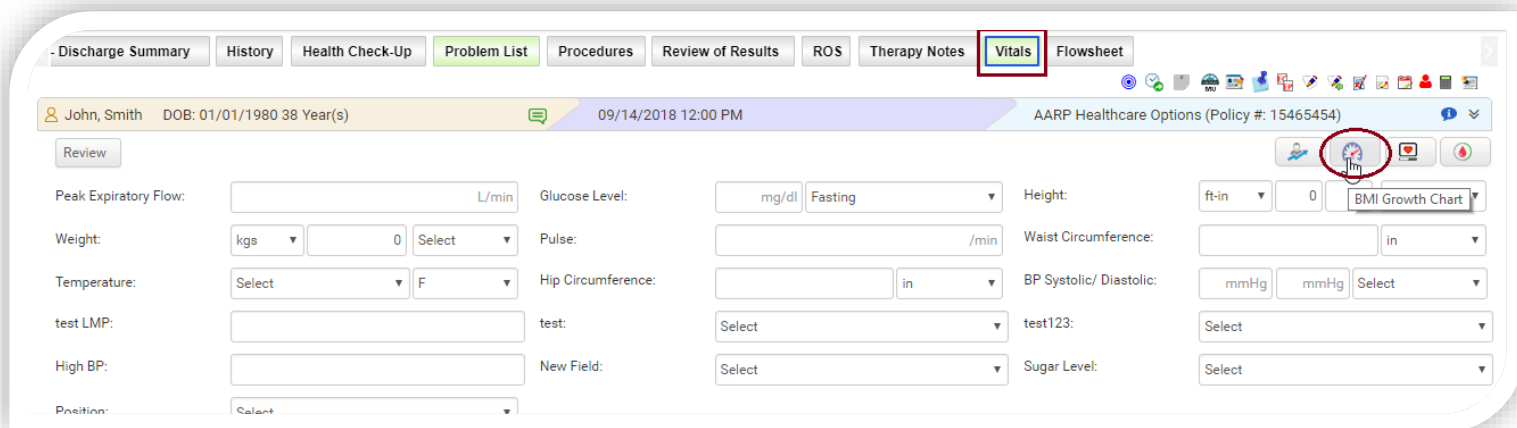
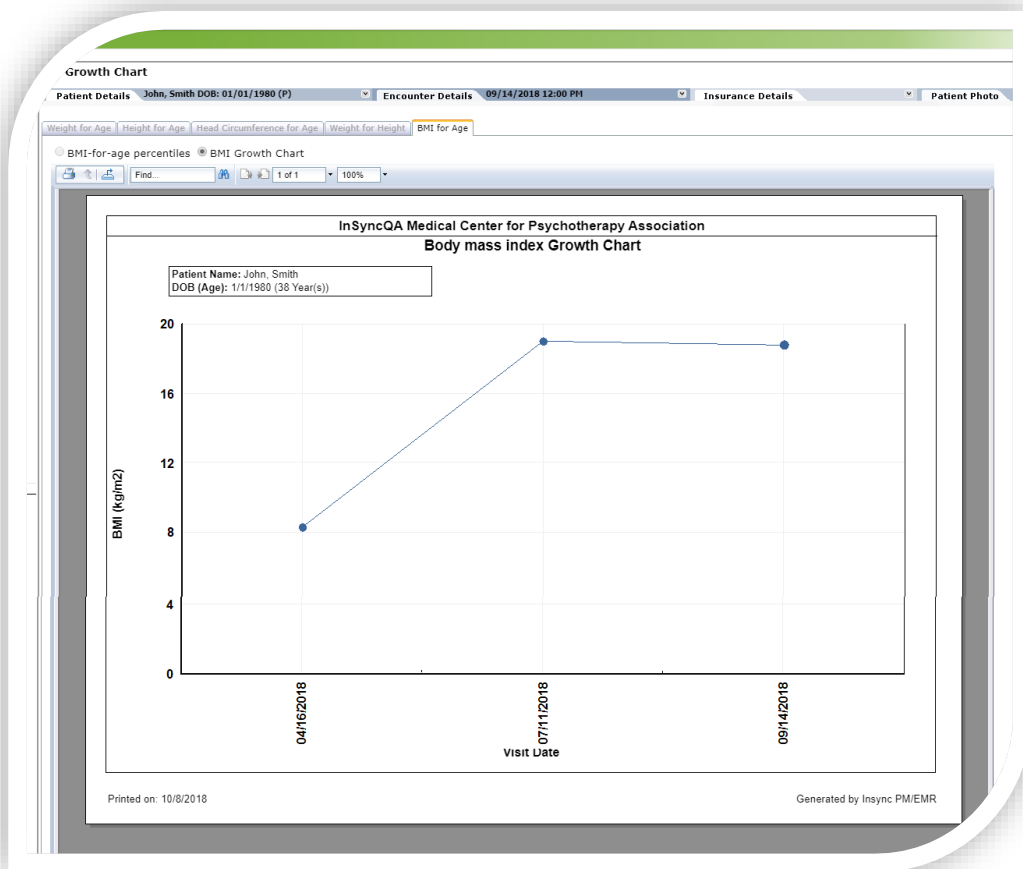
Charting Elements on Patients' Encounter Note:

Select one or more charting elements you want the patient portal users to view on the Encounter Note.

- ☒ Vitals
- ☒ Medications/Allergies
- ☒ History
- ☒ ROS
- ☒ Immunizations
- ☒ Health Maintenance
- ☒ Results/Orders Queue
- ☒ Physical Exam
- ☒ Diagnosis
- ☒ Treatment Plan
- ☒ Review of Results
- ☒ Supplementary
- ☒ Therapy Notes
- ☒ Antepartum Form
- ☒ Assessment Tools
- ☒ Procedures
- ☒ Custom Template
- ☒ Custom Form
- ☒ Flowsheet

VITALS: BMI GROWTH CHART

You can now generate the BMI Growth Chart for a patient by clicking the icon  shown at the top right corner of the Vitals screen. The restriction stopping you from generating a growth chart for anyone above the age of 20 has now been removed.

NEW ICD/DIAGNOSIS SEARCH ENGINE

InSync's ICD/Diagnosis search engine has been redesigned. The system now stores all ICD10 codes within the software hence improving the performance of how quickly the search results will appear to the user. The third-party vendor, IMO, used for supplying InSync with ICD10 codes has also been removed from the software. With these changes, users should be expecting to notice 2 differences in the new search. The cross-walk which aided in selecting more specific ICD10 codes vs general codes has been removed from the software. Also, the idea of seeing multiple ICD10 descriptions for the same ICD10 code has also been removed and you will only find ONE ICD10 description for each ICD10 code. If you feel the need to add more than one description for the same ICD10 code you will be able to do so.

CLINICAL QUALITY MEASURES (CQMs)

Following is a list of new as well as revised CQMs in this release:

New CQMs (Beta version)

- Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented (CMS22v6)
- Preventive Care and Screening: Influenza Immunization (CMS128v6)
- Diabetes: Foot Exam (CMS123v6)
- Diabetes: Medical Attention for Nephropathy (CMS134v6)
- Preventive Care and Screening: Screening for Depression and Follow-Up Plan (CMS2v7)
- Coronary Artery Disease (CAD): Beta-Blocker Therapy-Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF < 40%) (CMS145v6)
- Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD) (CMS144v6)

Revised CQMs

- Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet (CMS164v6)
- Use of Imaging Studies for Low Back Pain (CMS166v7)
- Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (CMS138v6)
- Diabetes: Hemoglobin A1c (HbA1c) Poor Control (> 9%) (CMS122v6)
- Cervical Cancer Screening (CMS124v6)
- Breast Cancer Screening (CMS125v6)
- Diabetes: Eye Exam (CMS131v6)
- Falls: Screening for Future Fall Risk (CMS139v6)
- Use of High-Risk Medications in the Elderly (CMS156v6)

PM FEATURES

[Back](#)

This section includes the PM features released in this version.

COMPLETELY RE-DESIGNED BATCH PAYMENT

[Back](#)

The Batch Payments feature is completely enhanced to make it more user-friendly and intuitive. Here are few features that you will find in new Batch Payments module.

✓ What's New in Batch Payments

- Overpayment will be transferred to Insurance/Patient Unapplied Credit Automatically (Upon marking batch as Worked)
- Ability to add Remark Codes while Posting Payment
- Rebill Feature
- Transfer functionality



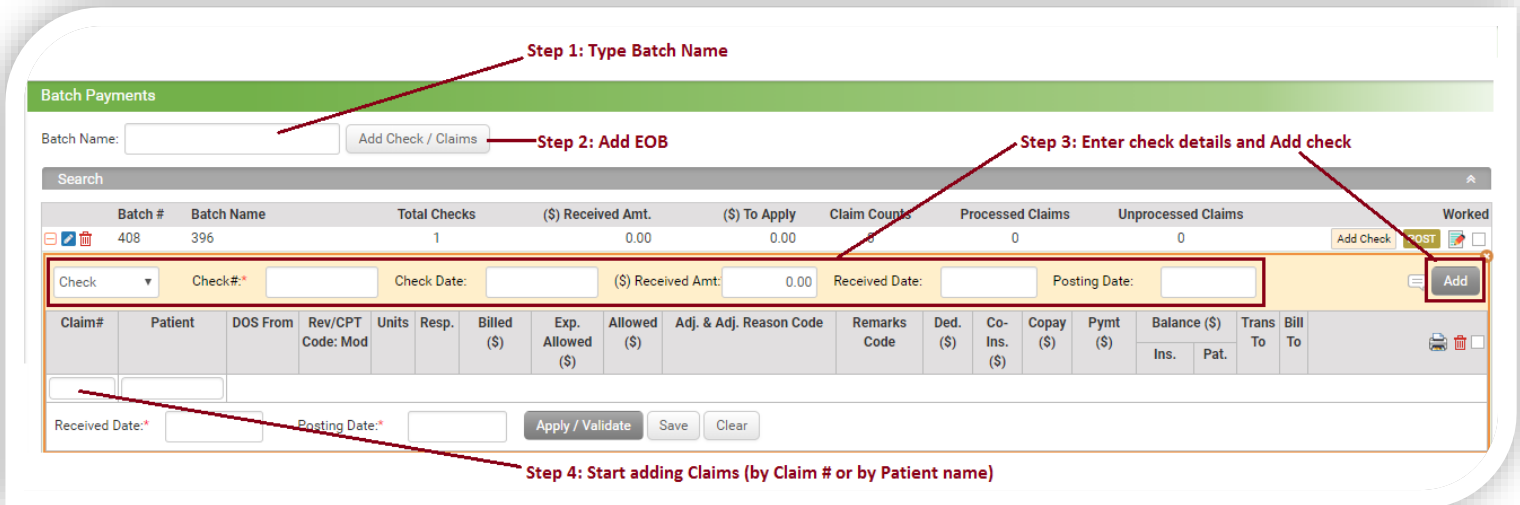
When Rebill and Transfer both features are used, system will consider only the Transfer in this case.

- Multiple Credit Adjustments
- Patient Payment
- Post one EOB at a time
- Unapplied Credit Adjustment for Insurance and Patient
- Earlier, payer was mandatory for batch payment. Now, you can add EOB and then good to go to add claims.
- Earlier, only batch payment was possible. Now, you can also post payment for a single claim.

ADD CLAIMS IN A BATCH

Adding claims is quick and easier now!

Create a batch, add it, and then, you are good to go to add claims. Look at the below screen:



Batch Payments

Batch Name: Add Check / Claims

Search

Batch #	Batch Name	Total Checks	(\$ Received Amt.	(\$ To Apply	Claim Counts	Processed Claims	Unprocessed Claims	Worked
408	396	1	0.00	0.00	0	0	0	Add Check POST

Check Details:

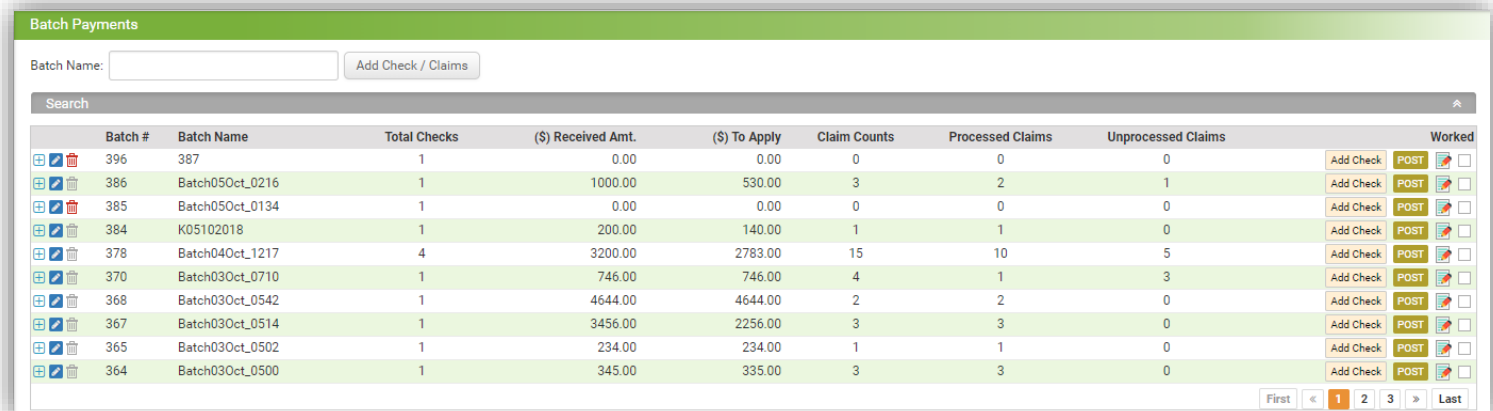
Check: Check#: Check Date: (\$ Received Amt: 0.00 Received Date: Posting Date: Add

Claim#	Patient	DOS From	Rev/CPT Code: Mod	Units	Resp.	Billed (\$)	Exp. Allowed (\$)	Allowed (\$)	Adj. & Adj. Reason Code	Remarks Code	Ded. (\$)	Co-Ins. (\$)	Copay (\$)	Pymt (\$)	Balance (\$)	Trans To	Bill To
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

Received Date: Posting Date: Apply / Validate Save Clear

Step 1: Type Batch Name
Step 2: Add EOB
Step 3: Enter check details and Add check
Step 4: Start adding Claims (by Claim # or by Patient name)

Once you add batches, they will appear as shown below:



Batch Payments

Batch Name: Add Check / Claims

Search

Batch #	Batch Name	Total Checks	(\$ Received Amt.	(\$ To Apply	Claim Counts	Processed Claims	Unprocessed Claims	Worked
396	387	1	0.00	0.00	0	0	0	Add Check POST
386	Batch05Oct_0216	1	1000.00	530.00	3	2	1	Add Check POST
385	Batch05Oct_0134	1	0.00	0.00	0	0	0	Add Check POST
384	K05102018	1	200.00	140.00	1	1	0	Add Check POST
378	Batch04Oct_1217	4	3200.00	2783.00	15	10	5	Add Check POST
370	Batch03Oct_0710	1	746.00	746.00	4	1	3	Add Check POST
368	Batch03Oct_0542	1	4644.00	4644.00	2	2	0	Add Check POST
367	Batch03Oct_0514	1	3456.00	2256.00	3	3	0	Add Check POST
365	Batch03Oct_0502	1	234.00	234.00	1	1	0	Add Check POST
364	Batch03Oct_0500	1	345.00	335.00	3	3	0	Add Check POST


First < 1 2 3 > Last

- To expand the batch, click the ⊕ icon. After expanding the batch, you can add more claims and post payment for each claim as per your requirement.
- To change the batch name, click the Edit icon ✎.
- To add EOBs to a batch, click the Add Check icon.
- To post payment for a batch, click the POST icon.

Call 877-346-7962 for customer service or e-mail us at support@insynchcs.com.

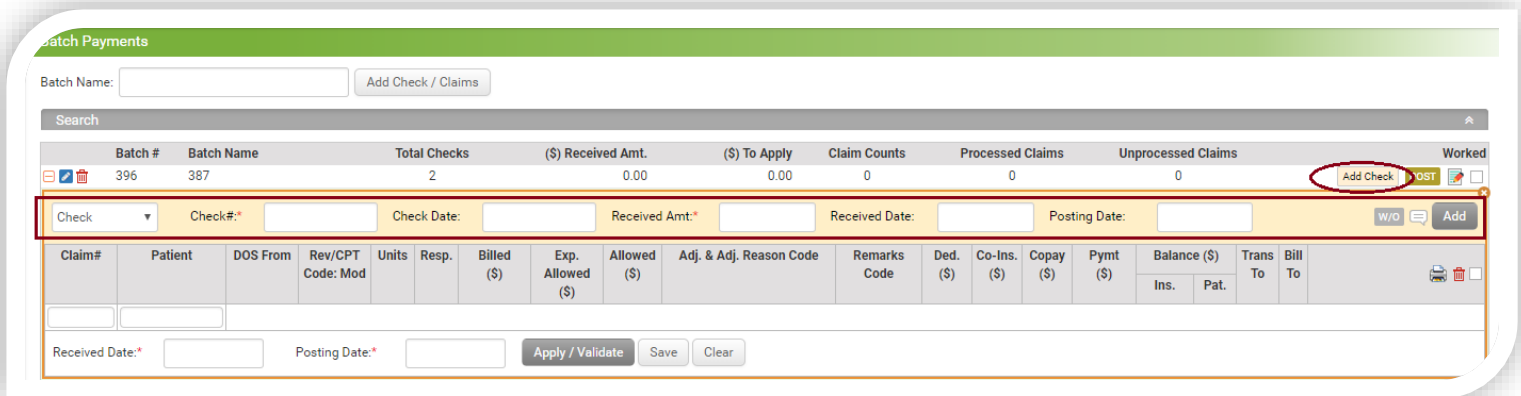
Page 37 of 52

Go to [TOP](#)

- To view the batch history who created or update the batch details, click the  icon.
- To mark the batch as Worked, select the check box from extreme right side in grid. You can use the search panel to filter Worked batches.

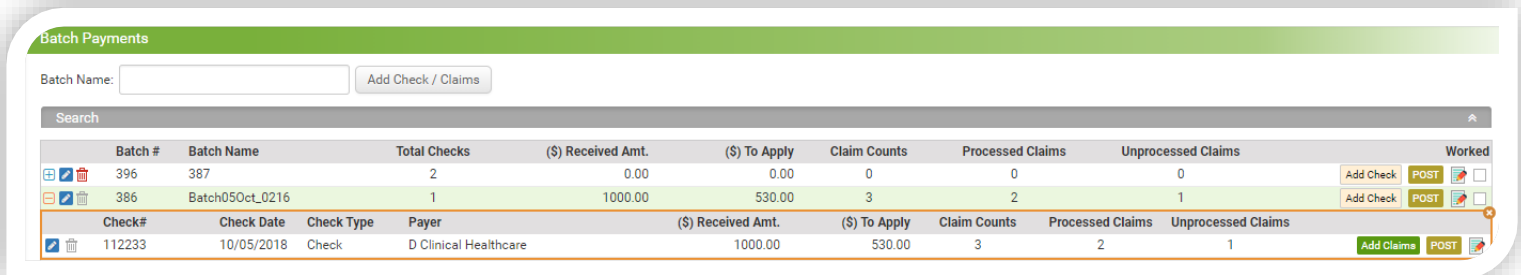
ADD EOBs TO A BATCH

When you click the Add EOBs button, a section opens right there to enable you to add EOB details. Look at the below screen. You can add EOB details and then click Add from extreme right.



The screenshot shows the 'Batch Payments' interface. At the top, there is a 'Batch Name' field and an 'Add Check / Claims' button. Below this is a search bar. The main table displays batch information with columns: Batch #, Batch Name, Total Checks, (\$ Received Amt., (\$ To Apply, Claim Counts, Processed Claims, Unprocessed Claims, and a 'Worked' checkbox. The first row shows Batch # 396, Batch Name 387, Total Checks 2, (\$ Received Amt. 0.00, (\$ To Apply 0.00, Claim Counts 0, Processed Claims 0, Unprocessed Claims 0, and a circled 'Add Check' button next to the 'Worked' checkbox. Below the table is a form to add new checks with fields for Check #, Check Date, Received Amt., Received Date, and Posting Date. At the bottom are 'Apply / Validate', 'Save', and 'Clear' buttons.

Once added the Check details, they will appear as shown below:



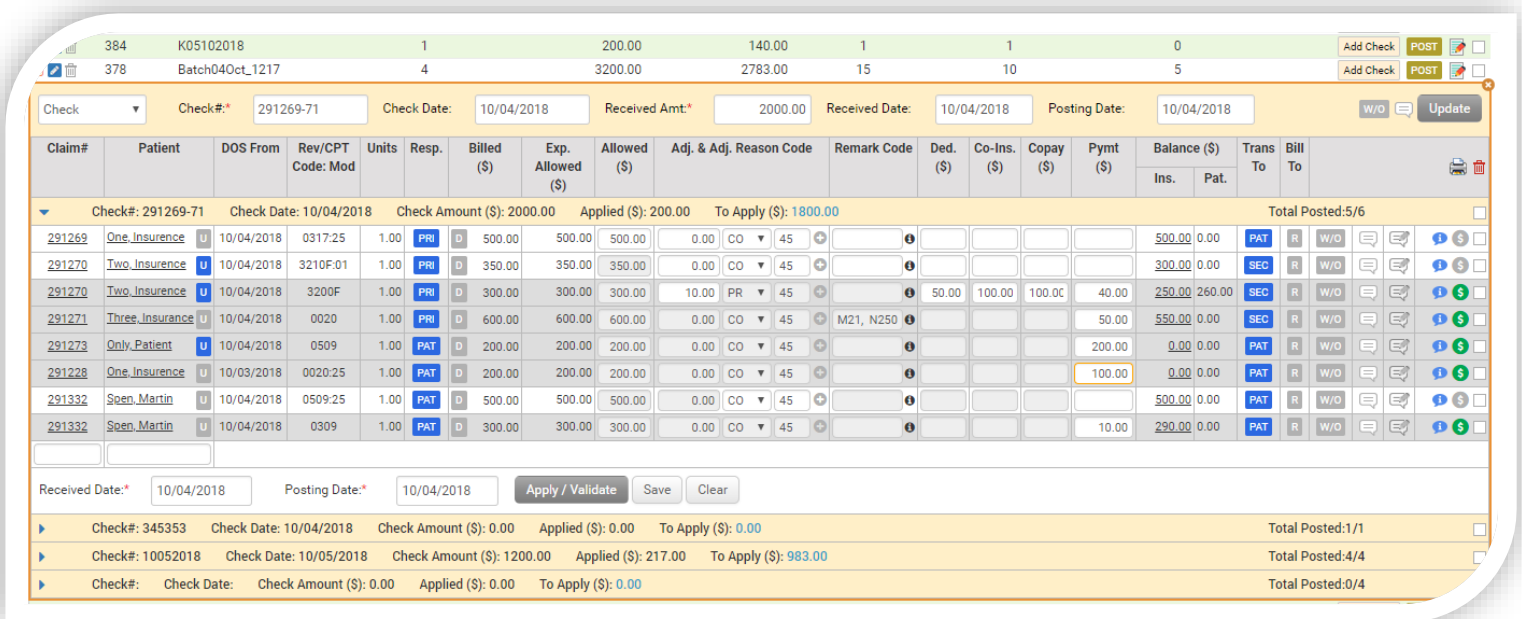
The screenshot shows the 'Batch Payments' interface after adding a check. The table now has two rows. The first row is Batch # 396, Batch Name 387, Total Checks 2, (\$ Received Amt. 0.00, (\$ To Apply 0.00, Claim Counts 0, Processed Claims 0, Unprocessed Claims 0, and a circled 'Add Check' button. The second row is Batch # 386, Batch Name Batch05Oct_0216, Total Checks 1, (\$ Received Amt. 1000.00, (\$ To Apply 530.00, Claim Counts 3, Processed Claims 2, Unprocessed Claims 1, and a circled 'Add Check' button. Below the table is a new section with columns: Check #, Check Date, Check Type, Payer, (\$ Received Amt., (\$ To Apply, Claim Counts, Processed Claims, and Unprocessed Claims. The first row in this section shows Check # 112233, Check Date 10/05/2018, Check Type Check, Payer D Clinical Healthcare, (\$ Received Amt. 1000.00, (\$ To Apply 530.00, Claim Counts 3, Processed Claims 2, and Unprocessed Claims 1. At the bottom right are 'Add Claims' and 'POST' buttons.

POSTING PAYMENT

When you click the Post button, a section opens right there to enable you to post the payment. You can post the payment for any EOB. Look at the extreme left side on the screen. Expand the EOB for which you want to post the payment.

Once entered claim details,

- Click Save to save the claims.
- Click Apply/Validate to post the payment.



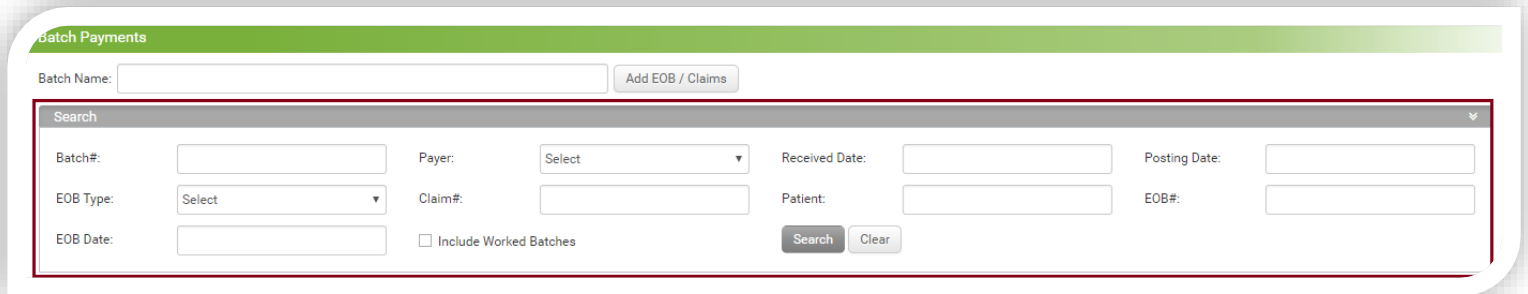
Claim#	Patient	DOS From	Rev/CPT Code: Mod	Units	Resp.	Billed (\$)	Exp. Allowed (\$)	Allowed (\$)	Adj. & Adj. Reason Code	Remark Code	Ded. (\$)	Co-Ins. (\$)	Copay (\$)	Pymt (\$)	Balance (\$)	Trans To	Bill To
291269	One Insurance	10/04/2018	0317:25	1.00	PRI	500.00	500.00	500.00	0.00 CO 45						500.00	0.00	PAT R W/O
291270	Two Insurance	10/04/2018	3210F:01	1.00	PRI	350.00	350.00	350.00	0.00 CO 45						300.00	0.00	SEC R W/O
291270	Two Insurance	10/04/2018	3200F	1.00	PRI	300.00	300.00	300.00	10.00 PR 45		50.00	100.00	100.00	40.00	250.00	260.00	SEC R W/O
291271	Three Insurance	10/04/2018	0020	1.00	PRI	600.00	600.00	600.00	0.00 CO 45	M21, N250				50.00	550.00	0.00	SEC R W/O
291273	Only Patient	10/04/2018	0509	1.00	PAT	200.00	200.00	200.00	0.00 CO 45					200.00	0.00	0.00	PAT R W/O
291228	One Insurance	10/03/2018	0020:25	1.00	PAT	200.00	200.00	200.00	0.00 CO 45					100.00	0.00	0.00	PAT R W/O
291332	Seen Martin	10/04/2018	0509:25	1.00	PAT	500.00	500.00	500.00	0.00 CO 45						500.00	0.00	PAT R W/O
291332	Seen Martin	10/04/2018	0309	1.00	PAT	300.00	300.00	300.00	0.00 CO 45					10.00	290.00	0.00	PAT R W/O

Received Date: 10/04/2018 Posting Date: 10/04/2018 Apply / Validate Save Clear

Check#	Check Date	Check Amount (\$)	Applied (\$)	To Apply (\$)	Total Posted
345353	10/04/2018	0.00	0.00	0.00	1/1
10052018	10/05/2018	1200.00	217.00	983.00	4/4
		0.00	0.00	0.00	0/4

BATCH PAYMENTS - SEARCH PANEL

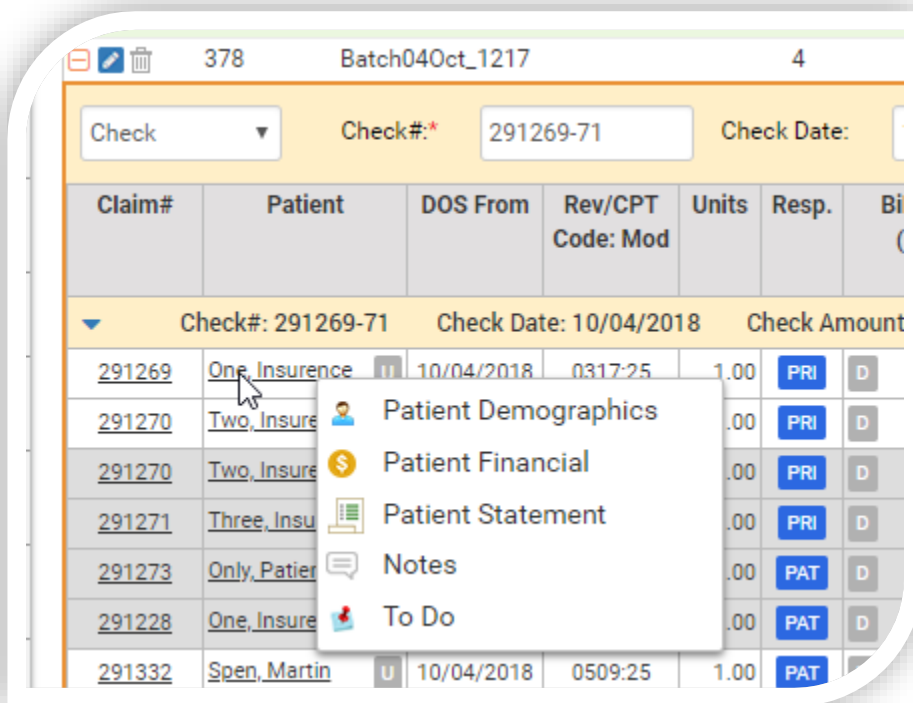
Use Search panel to search the batches for EOBs and claims. If you have marked the batch as Worked, you can select the 'Include Worked Batches' check box to view such batches.



The screenshot shows the 'Batch Payments' search panel. It includes a 'Batch Name' field, an 'Add EOB / Claims' button, and a 'Search' section with the following fields: Batch#, EOB Type, EOB Date, Payer (dropdown), Claim#, Include Worked Batches (checkbox), Received Date, Patient, Posting Date, and EOB#. There are 'Search' and 'Clear' buttons at the bottom right of the search section.

MORE OPTIONS ON CLICKING PATIENT NAME

When you click the patient name, you will see various options there.



The screenshot shows a table of batch payments. The table has columns: Claim#, Patient, DOS From, Rev/CPT Code: Mod, Units, Resp., and Bi. A context menu is open over the 'Patient' column, showing options: Patient Demographics, Patient Financial, Patient Statement, Notes, and To Do. The table data includes rows for various claims and patients, such as 'One, Insurance', 'Two, Insurance', 'Three, Insurance', 'Only, Patient', 'One, Insurance', and 'Spencer, Martin'.

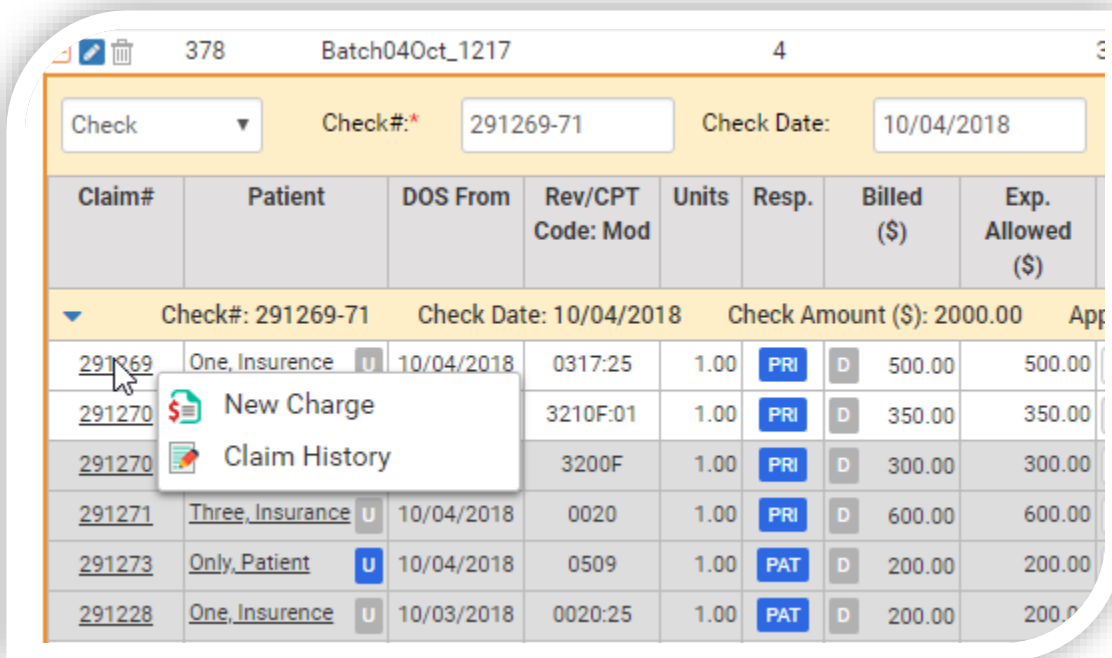
You can,

- Go to Patient Demographics
- Go to Patient Financial Screen
- Access Patient Statement
- View Notes
- Access To Dos

MORE OPTIONS ON CLICKING CLAIM NUMBER

On clicking the claim number, you can,


- Access New Charge screen
- View Claim History

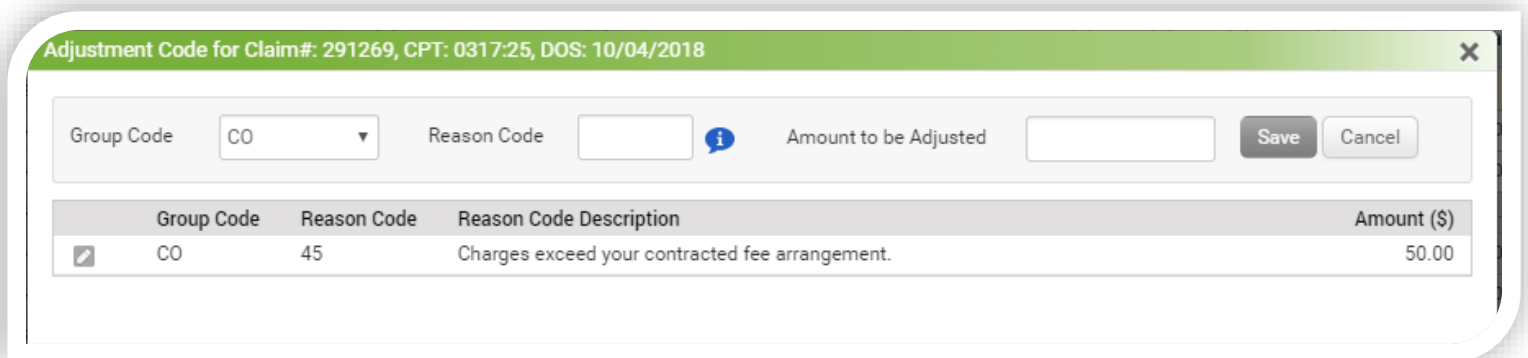


378 Batch04Oct_1217 4

Check: Check#: 291269-71 Check Date: 10/04/2018

Claim#	Patient	DOS From	Rev/CPT Code: Mod	Units	Resp.	Billed (\$)	Exp. Allowed (\$)
Check#: 291269-71 Check Date: 10/04/2018 Check Amount (\$): 2000.00 App							
291269	One, Insurance U	10/04/2018	0317:25	1.00	PRI D	500.00	500.00
291270			3210F:01	1.00	PRI D	350.00	350.00
291270			3200F	1.00	PRI D	300.00	300.00
291271	Three, Insurance U	10/04/2018	0020	1.00	PRI D	600.00	600.00
291273	Only, Patient U	10/04/2018	0509	1.00	PAT D	200.00	200.00
291228	One, Insurance U	10/03/2018	0020:25	1.00	PAT D	200.00	200.00


When you click the  for Adjustment Reason Code, the following screen appears. You can then enter the Reason Code and Amount to be Adjusted there.

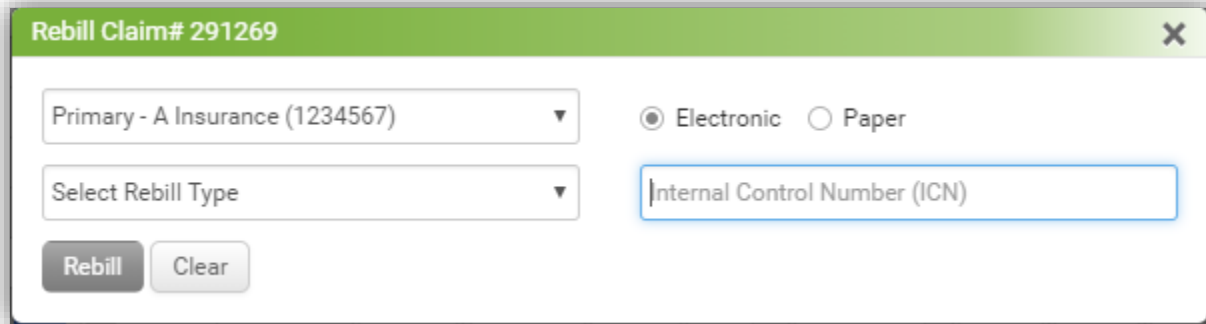


Adjustment Code for Claim#: 291269, CPT: 0317:25, DOS: 10/04/2018

Group Code: CO Reason Code: 45 Amount to be Adjusted: 50.00 [Save] [Cancel]

Group Code	Reason Code	Reason Code Description	Amount (\$)
CO	45	Charges exceed your contracted fee arrangement.	50.00

To rebill the claim, you can click the  icon on the posting screen. Select the appropriate rebill options on this screen and click Rebill.




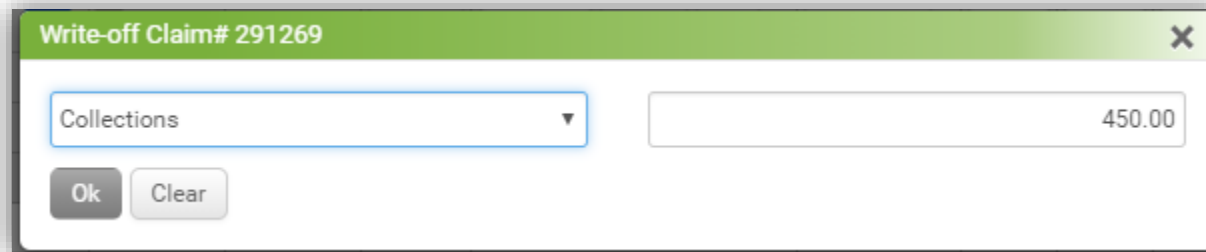
Rebill Claim# 291269 [X]

Primary - A Insurance (1234567) ▼ ☒ Electronic ☐ Paper

Select Rebill Type ▼ Internal Control Number (ICN) []

Rebill **Clear**


To write off the claim, click the  icon on the posting screen. Select the appropriate write off options on this screen and click Ok.



Write-off Claim# 291269 [X]

Collections ▼ [] 450.00

Ok **Clear**

Info icon appears on the extreme right side. Click the info icon  to view the payment details. Look at the following screen for reference:

Payment Details for Claim#: 99976, CPT: 99213				
DOS From	Posted Date	Transaction Type	Amount (\$)	Payment Type Details
05/24/2016	10/02/2018	Insurance payment (Primary - Cigna Behavioral Health)	10.00	ACH# 123 Effective Date 09/11/2018
05/24/2016	10/02/2018	Credit adjustment (Primary - Cigna Behavioral Health)	25.91	ACH# 123 Effective Date 09/11/2018
05/24/2016	10/01/2018	Insurance payment (Secondary - Blue Cross Blue Shield Tn-Chattanooga-)	2.00	CHK# 1111 Dated 10/01/2018
05/24/2016	10/01/2018	Credit adjustment (Secondary - Blue Cross Blue Shield Tn-Chattanooga-)	2.00	CHK# 1111 Dated 10/01/2018
05/24/2016	10/01/2018	Deductible (Secondary - Blue Cross Blue Shield Tn-Chattanooga-)	2.00	CHK# 1111 Dated 10/01/2018
05/24/2016	10/01/2018	Co Insurance (Secondary - Blue Cross Blue Shield Tn-Chattanooga-)	2.00	CHK# 1111 Dated 10/01/2018
05/24/2016	10/01/2018	Co Payment (Secondary - Blue Cross Blue Shield Tn-Chattanooga-)	2.00	CHK# 1111 Dated 10/01/2018

VIEW PAYER DETAILS WHEN PRINTING CLAIMS FROM NEW CHARGE

When you print the claims from the New Charge screen that has responsibility as ‘Patient’, system now prints the payer details as well. It will be the most recent payer to whom the claim was submitted.

Previously, payer details were not printed when the claim had ‘Patient’ responsibility.

ALLOW UNDOING ERA MAPPING

[Back](#)

Whenever an ERA Mapping is performed, the system now allows the user to Undo the mapping in the event of an error or unintentional action. The Undo Mapping button will remain available until the payment is posted. Additional changes in the ERA window also include:

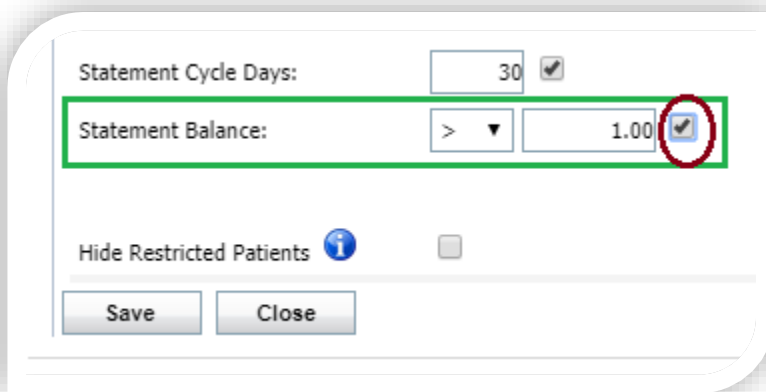
- Your clearinghouse may sometimes append a string of numbers (CLP) to your InSync claim numbers for tracking and mapping purposes. Though in most cases, the clearinghouse will remove these numbers prior to forwarding the ERA file to InSync, there are situations where the numbers are still appended to the claim number resulting in the InSync system not recognizing the claim. To reduce these issues, the system can now be configured to monitor for appended CLP numbers. The system will then remove them as part of the ERA payment processing procedures and eliminate the need to manually edit ERA payment files prior to processing the payment in your InSync system.
- To simplify and expedite the claim mapping procedures, additional details are now added on the Map Claims screen to allow the user to map the claim to the payment quickly and accurately:

MRN		Submission Date		Submitted To
-----	--	-----------------	--	--------------

SEND PATIENT STATEMENT FOR MINIMUM BALANCE ONLY

The system will now allow the practice to default the minimum balance required to generate statements. Previously, users had to designate the minimum statement balance for patients during statement processing. You can now define the minimum statement balance in the Practice Defaults screen. The practice will also have the ability to prevent users from changing the minimum statement balance during statement generation by clicking on the check box next to the minimum balance definition in practice defaults.

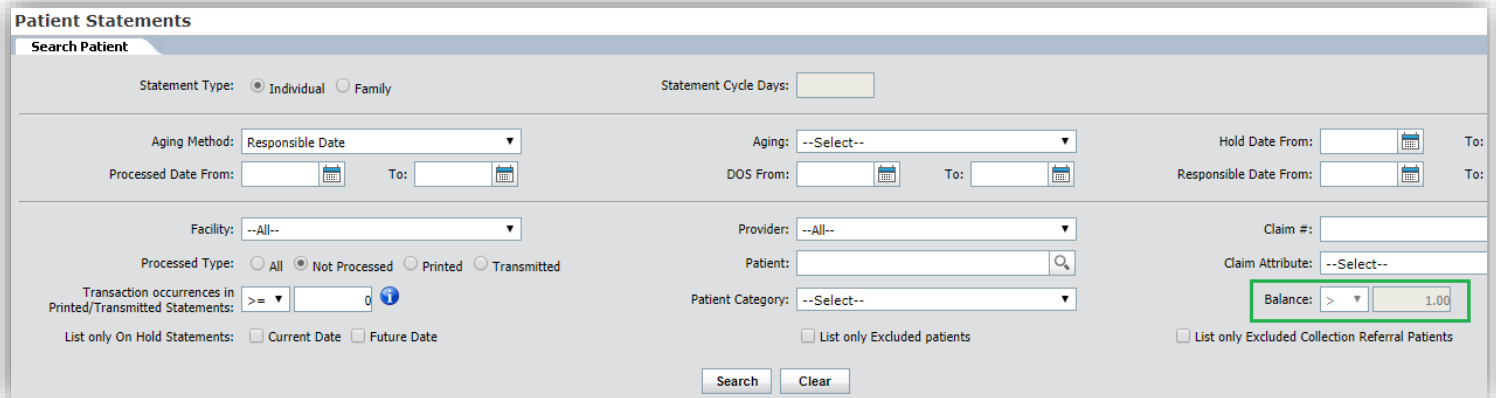
To access the Practice Defaults screen, expand left pane, select Administration > Practice > Practice Defaults link.



The screenshot shows the 'Practice Defaults' dialog box. The 'Statement Cycle Days' is set to 30 with a checked checkbox. The 'Statement Balance' is set to 1.00 with a dropdown arrow and a checked checkbox. The 'Hide Restricted Patients' checkbox is unchecked. There are 'Save' and 'Close' buttons at the bottom.

In the Statement Balance field, choose the minimum amount and select the check box next to it.

When you access the Patient Statements screen, the Balance field will become disabled so that the user cannot change it when filtering through patient statements.



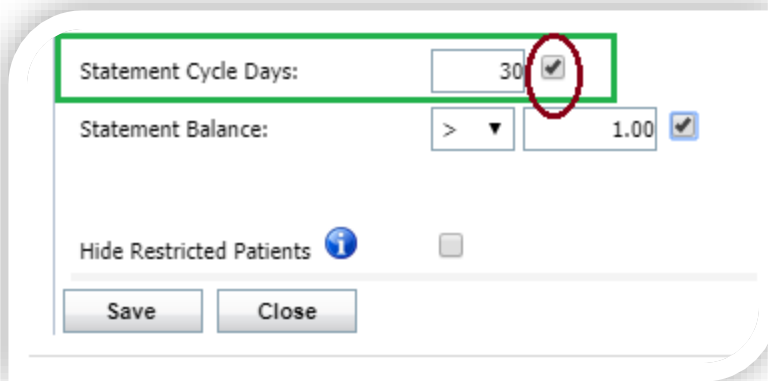
The screenshot shows the 'Patient Statements' search interface. It includes various filters like 'Statement Type', 'Aging Method', 'Facility', 'Provider', 'Patient', and 'Patient Category'. The 'Balance' field is highlighted with a green box and has a dropdown arrow and a checked checkbox. There are 'Search' and 'Clear' buttons at the bottom.

SEND PATIENT STATEMENT AFTER SPECIFIC PERIOD ONLY

System facilitates the users with a choice to send patient statement after specific number of days only. For example, you can choose to send patient statement only if it is not sent in last 30 days, if it is within 30 days, then you may not want to send it.

In this release, a check box is introduced on the Practice Defaults screen, if you select this check box, the user will not be able to change the days while filtering through the patient statements.

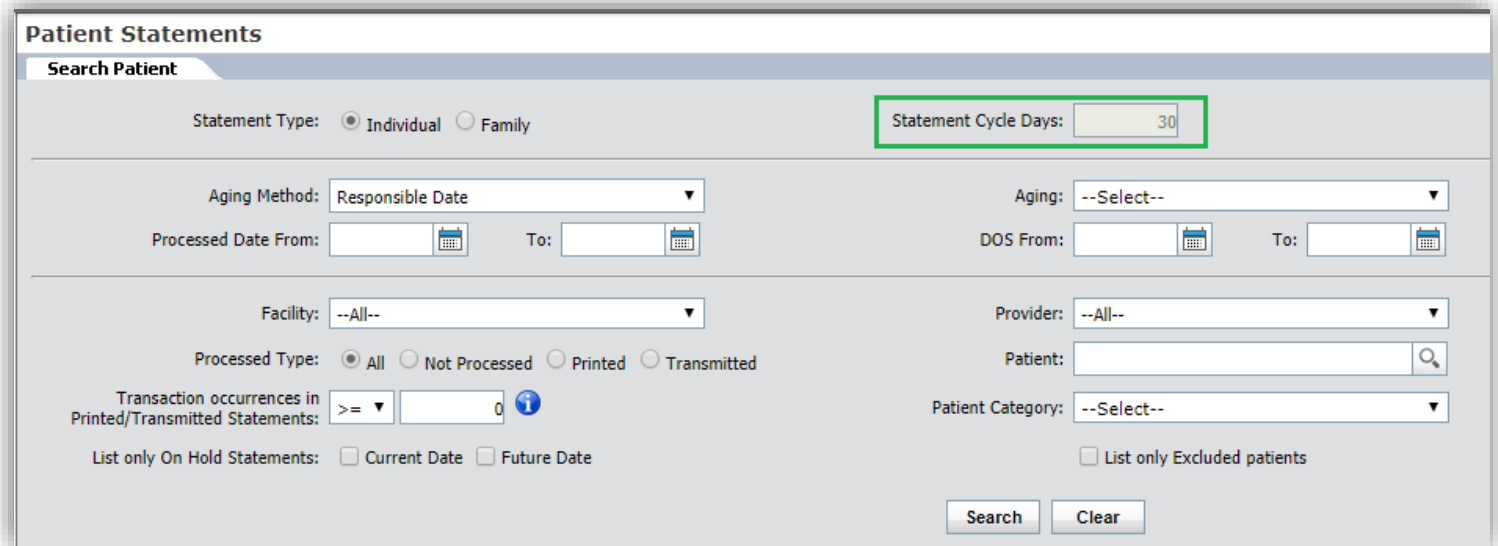
To access the Practice Defaults screen, expand left pane, select Administration > Practice > Practice Defaults link.



The screenshot shows the 'Practice Defaults' dialog box. The 'Statement Cycle Days' field is highlighted with a green box and contains the value '30'. A red circle is drawn around the checkbox next to the '30', which is currently checked. Below this, the 'Statement Balance' field is set to '>' and '1.00', also with a checked checkbox. At the bottom, there is a 'Hide Restricted Patients' checkbox (unchecked) and 'Save' and 'Close' buttons.

In the Statement Cycle Days field, choose the number of days and select the check box next to it.

When you access the Patient Statements screen, the 'Statement Cycle Days' field will become disabled so that the user cannot change it when filtering through patient statements.



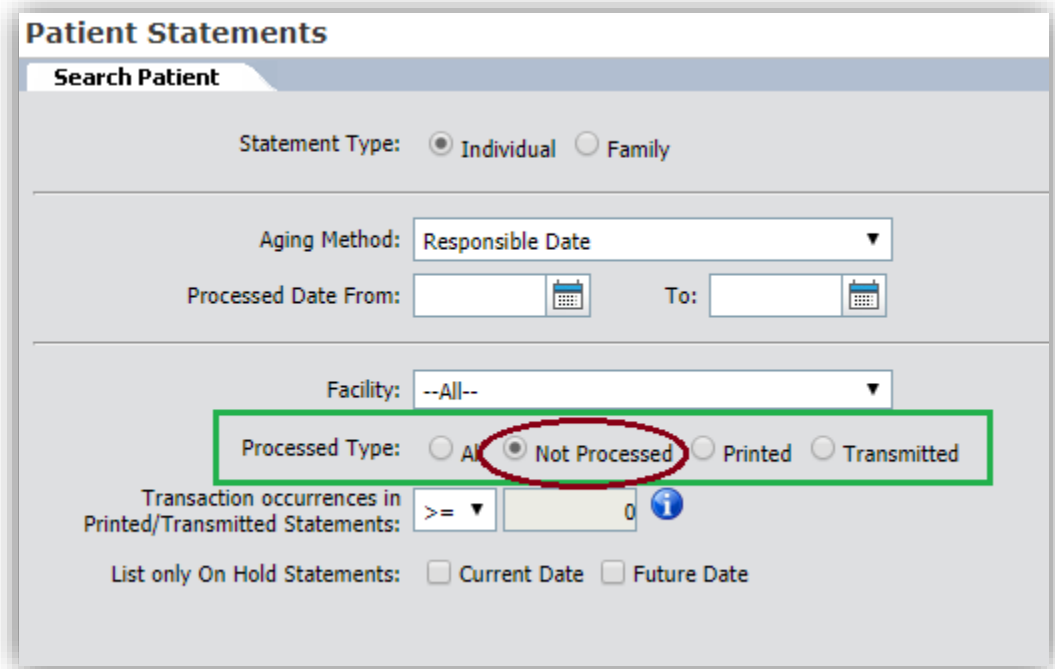
The screenshot shows the 'Patient Statements' search interface. The 'Statement Cycle Days' field is highlighted with a green box and contains the value '30'. The interface includes various filters: 'Statement Type' (Individual/Family), 'Aging Method' (Responsible Date), 'Aging' (dropdown), 'Processed Date From/To' (calendar), 'DOS From/To' (calendar), 'Facility' (dropdown), 'Provider' (dropdown), 'Patient' (search), 'Patient Category' (dropdown), 'Processed Type' (All/Not Processed/Printed/Transmitted), 'Transaction occurrences in Printed/Transmitted Statements' (dropdown), and 'List only On Hold Statements' (Current Date/Future Date). 'Search' and 'Clear' buttons are at the bottom right.

PATIENT STATEMENTS - ACCESS 'NOT PROCESSED' STATEMENTS BY DEFAULT

When you accessed the Patient Statements screen, system filtered out All statements by default.

Now, the system will display only 'Not Processed' patient statements when you access the Patient statements screen for the first time.

If you want, you can change the different option from the 'Processed Type' section.



Patient Statements

Search Patient

Statement Type: ☒ Individual ☐ Family

Aging Method:

Processed Date From: To:

Facility:

Processed Type: ☐ All ☒ Not Processed ☐ Printed ☐ Transmitted

Transaction occurrences in Printed/Transmitted Statements:

List only On Hold Statements: ☐ Current Date ☐ Future Date

TRANSMITTED DISCHARGE DETAILS IN 837 FILE FOR UB04 (INSTITUTIONAL CLAIMS)

On the New Charge - Additional Claim Information screen, system enables you to capture Discharge Date and Time. In order to avoid claim rejections, system now transmits Discharge Time in 837 file for UB04 (Institutional Claims.)

TRANSMITTING DUNNING MESSAGE

Dunning message will get included while transmitting patient statement through vendor. In case of multiple aging, the comment from higher aging shall be transmitted.

NEXT APPOINTMENT DATE ON THE UNAPPLIED CREDIT REPORT

When you export the Unapplied Credit Report to excel, you can now find the patient's next appointment date, if you have booked any. This helps you to decide whether to refund the amount to the patient or not.

Transfer C	Destination	Transfer U	Current U	Patient C	Insurance	Comment	User	Next Appointment Date
Unapplied Credit			145				Jean, Katherine, MD	10/02/2018
Direct Payment			102	507	5,943.00		Jean, Katherine, MD	10/02/2018
Direct Payment						Collected	User, Patient	10/02/2018
Direct Payment						Collected	User, Patient	
Direct Payment			170		700		Jean, Katherine, MD	
Direct Payment							Jean, Katherine, MD	

CONFIGURE 'ONLINE PAYMENT LOG' AS BOOKMARK IN YOUR LEFT PANE

In the left pane, you can see several bookmarks for your quick access. You can now also find 'Online Payment Log' in this list. To configure it as your bookmark, access the User Profile screen, and select the Online Payment Log check box in the Billing tab.

To access the User Profile screen, click the orange wheel icon from the Dashboard.

User Profile

Bookmarks

Dashboard

Default

General

Billing

Reports (Charting)

Reports (Billing)

☐ Batch Payments
 ☐ Claims Processing
 ☐ Manage Superbill
 ☐ Patient Statements
 ☐ Print Superbill

☐ Card Payment Log
 ☐ Electronic Remittance
 ☒ Online Payment Log
 ☐ Payment Receipt

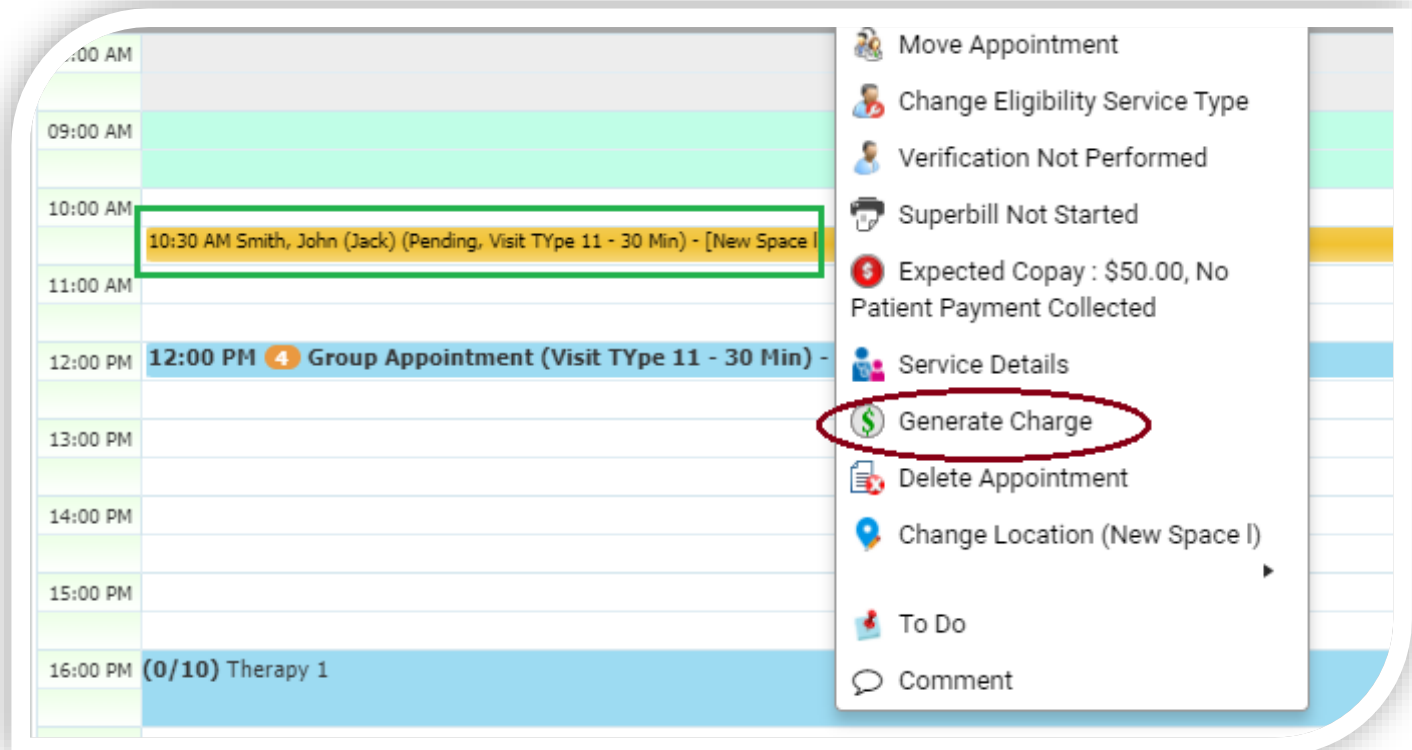
SHOW FACILITY ON THE DAILY PAYMENTS REPORT

When you export the Daily Payments Report to excel, you can now find the Facility details there.

Facility	Provider	Attribute	Insurance	Patient	Grand Tot
InSync Healthcare	Bennett, Christy	None	5.00	0.00	5.00
InSync Healthcare	Jean, Katherine, MD	None	0.00	57.00	57.00
Grand Total			5.00	57.00	62.00

GENERATE CHARGE FROM SCHEDULER

System now facilitates the user to generate the charge without starting Superbill or Encounter. Previously, if superbill or encounter was not started, then the system did not show the 'Generate Charge' option on the Scheduler screen.



The screenshot shows a scheduler interface with a list of appointments. A context menu is open over an appointment, showing various actions. The 'Generate Charge' option is highlighted with a red circle.


Time	Appointment
09:00 AM	
10:00 AM	10:30 AM Smith, John (Jack) (Pending, Visit TYpe 11 - 30 Min) - [New Space]
11:00 AM	
12:00 PM	12:00 PM 4 Group Appointment (Visit TYpe 11 - 30 Min) -
13:00 PM	
14:00 PM	
15:00 PM	
16:00 PM	(0/10) Therapy 1

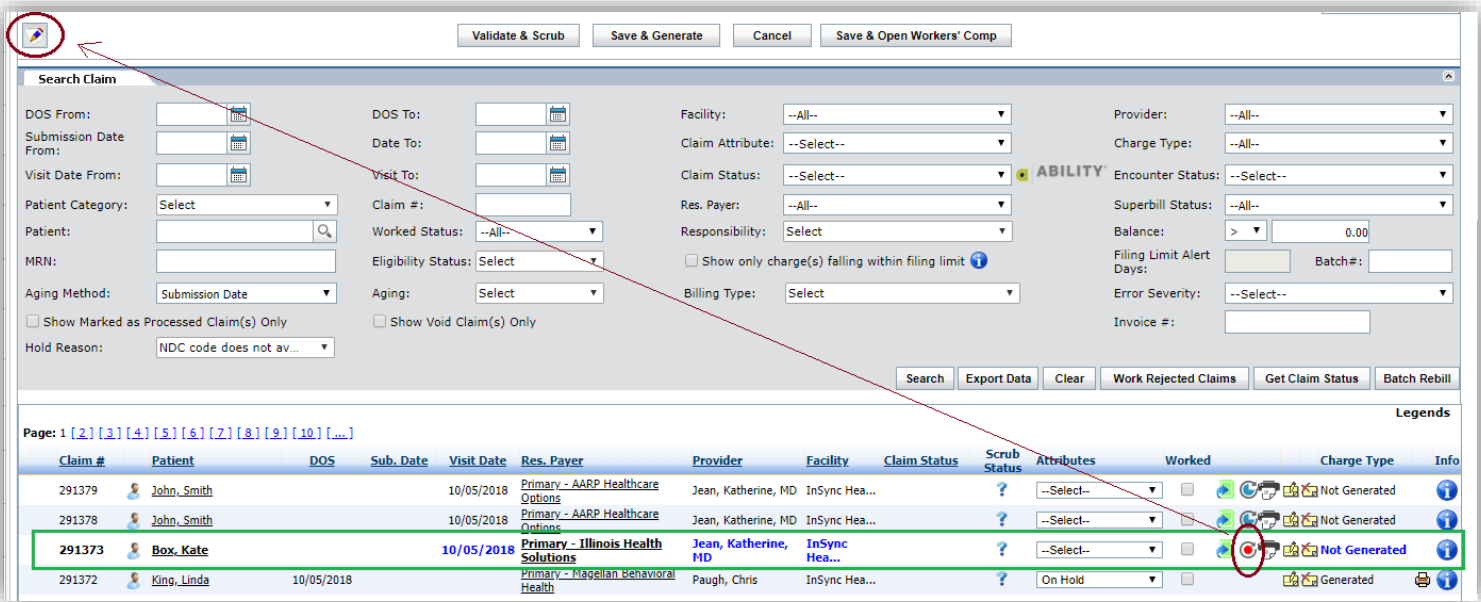
- Move Appointment
- Change Eligibility Service Type
- Verification Not Performed
- Superbill Not Started
- Expected Copay : \$50.00, No Patient Payment Collected
- Service Details
- Generate Charge**
- Delete Appointment
- Change Location (New Space I)
- To Do
- Comment

System now facilitates you to transmit Family Statements to the vendor. You can now transmit family statements if Electronic Patient Statement feature is activated with Practice Insight. Currently this feature is available only to the Practice Insight clients. On the Patient Statements screen, locate the Transmit button for the Family statement type.

VIEW ENCOUNTER NOTE AS A SEPARATE WINDOW

On the New Charge screen, when you open the Encounter Note for the closed encounters, it will appear as a separate window. This will help you to edit the charge details looking at the Encounter Note details.

 Once opened the Encounter Note, you can press Alt Tab to toggle between the screens.



Search Claim

Validate & Scrub Save & Generate Cancel Save & Open Workers' Comp

DOS From: [] DOS To: [] Facility: --All-- Provider: --All--

Submission Date From: [] Date To: [] Claim Attribute: --Select-- Charge Type: --All--

Visit Date From: [] Visit To: [] Claim Status: --Select-- ABILITY Encounter Status: --Select--

Patient Category: Select Claim #: [] Res. Payer: --All-- Superbill Status: --All--

Patient: [] Worked Status: --All-- Responsibility: Select Balance: > 0.00

MRN: [] Eligibility Status: Select [] Show only charge(s) falling within filing limit Filing Limit Alert Days: [] Batch #: []

Aging Method: Submission Date Aging: Select Billing Type: Select Error Severity: --Select-- Invoice #: []

☐ Show Marked as Processed Claim(s) Only ☐ Show Void Claim(s) Only

Hold Reason: NDC code does not av... Search Export Data Clear Work Rejected Claims Get Claim Status Batch Rebill

Page: 1 [2] [3] [4] [5] [6] [7] [8] [9] [10] [...]

Claim #	Patient	DOS	Sub. Date	Visit Date	Res. Payer	Provider	Facility	Claim Status	Scrub Status	Attributes	Worked	Charge Type	Info
291379	John, Smith			10/05/2018	Primary - AARP Healthcare Options	Jean, Katherine, MD	InSync Hea...	?	--Select--			Not Generated	
291378	John, Smith			10/05/2018	Primary - AARP Healthcare Options	Jean, Katherine, MD	InSync Hea...	?	--Select--			Not Generated	
291373	Box, Kate			10/05/2018	Primary - Illinois Health Solutions	Jean, Katherine, MD	InSync Hea...	?	--Select--			Not Generated	
291372	King, Linda	10/05/2018			Primary - Magellan Behavioral Health	Paugh, Chris	InSync Hea...	?	On Hold			Generated	

ADDED CLAIM ADJUSTMENT REASON CODES

With reference to the WPC website, following are the newly added claim adjustment reason codes in the system:

1. Code: 295
Description: Pharmacy Direct/Indirect Remuneration (DIR)
Transaction Type: Credit
Group Code: CO,OA,PR,PI
Action: Next payer
2. Code: 296
Description: Precertification/authorization/notification/pre-treatment number may be valid but does not apply to the provider.
Transaction Type: Credit
Group Code: CO,OA,PR,PI
Action: Next payer

ADDED REMITTANCE ADVICE REMARKS CODES

With reference to the WPC website, following are the newly added remittance advice remarks codes in the system:

- | Code | Description |
|-------------|---|
| 1. N800 | Only one service date is allowed per claim. |
| 2. N801 | Services performed in a Medicare participating or CAH facility under a self-insured tribal Group Health Plan, in accordance with Federal Regulation 42 CFR 136. |
| 3. N802 | This claim/service is not payable under our service area. The claim must be filed to the Payer/Plan in whose service area the Rendering Physician is located. |
| 4. N803 | Submission of the claim for the service rendered is the responsibility of the Contracted Medical Group or Hospital. |
| 5. N804 | Alert: The claim/service was processed through the Outpatient Code Editor (OCE). |
| 6. N805 | Alert: The claim/service was processed through the Correct Code Editor (CCE). |
| 7. N806 | Payment is included in the Global transplant allowance. |
| 8. N807 | Payment adjustment based on the Merit-based Incentive Payment System (MIPS). |
| 9. N808 | Not covered for this provider type / provider specialty. |